

California Department of Corrections and Rehabilitation

Office of Audits and Compliance



Operational Peer Review

KERN VALLEY STATE PRISON

December 1 – December 12, 2008

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OFFICE OF AUDITS AND COMPLIANCE

KERN VALLEY STATE PRISON

EXECUTIVE SUMMARY

The Office of Audits and Compliance, in conjunction with various teams, conducted an audit of Administrative Segregation (Ad Seg) and Due Process, Business Services, Information Security, Inmate Education Programs, Inmate Appeals, Ad Seg Bed Utilization, and Radio Communication, [REDACTED], Case Records, [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] and Risk Management at Kern Valley State Prison (KVSP). The audit was performed during the period of December 8 through December 12, 2008. The purpose of the audit was to determine KVSP's compliance with State, federal, and departmental rules, regulations, policies, and procedures.

Preliminary audit reports were prepared for each of the audited areas. This executive summary identifies the significant issues identified in each of the preliminary reports. For more information on the areas of interest, please see the detailed preliminary report. The Office of Audits and Compliance requests that KVSP provide a corrective action plan 30-days from the date of the preliminary report.

A summary of the significant issues is as follows:

Ad Seg and Due Process

Areas of concern were found in the following areas:

- **Exercise.** The walk-alone yard group designation in Units B1 and B2 are only receiving four hours of outside exercise per week.
- **Significant Information on the Isolation/Segregation Profile (CDC 114-A).** The review revealed that a CDC 114-A is maintained for each inmate assigned to the Ad Seg units. Although the CDC 114-As were found to contain significant information, in chronological order, relating to the inmate during the course of segregation, fish kits, cell inspections, and exercise were not consistently documented.
- **Inmate Segregation Profile (CDC 114-A1) 90-day Update.** The review revealed that in a random sample of 32 CDC 114-A1s reviewed, 9 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require a 90-day update. Of the 23 ratable CDC 114-A1s, 17 (77 percent) were updated as required.
- **Fire Drills.** Of the 48 required simulated emergency fire drills, 18 (38 percent) were completed as required.

- **Administrative Review.** Of the 30 records reviewed, 22 (73 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 8 remaining records, 5 documented a late countersignature by the Associate Warden (1 to 3 days) when the review was conducted by an acting Captain and 3 records documented a late review by a Captain (1 day).
- **Witnesses on the Administrative Segregation Unit Placement Notice (CDC 114-D).** Of the 30 records reviewed, 26 (87 percent) contained documentation regarding the need for witnesses. The 4 remaining records left this section blank.
- **Classification Hearing Within 10 Days.** Of the 30 records reviewed, 26 (87 percent) contained documentation of an Information Classification Committee (ICC) review within 10 days of an inmate's placement in Ad Seg. The 4 remaining records documented a late ICC review (1 to 5 days).
- **Determinations Documented on the Classification Chrono (CDC 128-G).** Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Of the 23 ratable records, 19 (83 percent) contained documentation of the determination arrived at during the ICC on the CDC 128-G. The 4 remaining records did not address the due process violation of a late ICC on the CDC 128-G.
- **Witnesses on the CDC 128-G.** Of the 30 records reviewed, 27 were not ratable as the need for witnesses was properly documented on the CDC 114-D or the CDC 128-G had not yet been typed. Of the 3 remaining records, 2 (67 percent) properly documented the need for witnesses as required. The 1 remaining CDC 128-G did not contain this information.
- **Training.** Documentation provided indicated that 88 custody staff have been assigned to Ad Seg for one year or more. These 88 staff members are each required to have received 11 specialized training classes. Of the 968 required specialized training classes, 842 (87 percent) have been taken.
- **Signing Post Orders.** The review revealed there are 124 identified staff who are assigned to 72 Ad Seg posts. Of the 157 required signatures, 102 (65 percent) were present acknowledging the understanding of the post orders.
- **Post Order Supervisory Review.** The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the Ad Seg units read and understand their post order upon assuming their post.

Business Services

Personnel:

- As of December 2008, there are 21 suspended payments that have not been cleared within 90 days and one dates back to April 2006.

- The Time and Attendance Report, Std. form 672 is completed in pencil instead of ink as required. This occurred in five of the nine Std. 672's reviewed.
- Currently, there are seven unauthorized permanent full time positions appointed into the 918 Blanket. Two of the positions date back to February 2008 and are in Plant Operations. This issue resulted in over expending the budget authority by \$238,670.
- Hiring package for the Correctional Administrator interviews conducted January 2 through 4, 2008 did not include the interview questions for the candidate hired. In addition, the hiring package for the Personnel Supervisor listed on the Change in Established Positions, CDC 607 log for September 1, 2005, could not be located.
- Separation of duties is inadequate over the distribution of payroll when seven of the 15 paymasters are also unit timekeepers who distribute salary warrants. This issue could result in late detection of errors and/or irregularities.
- There is a case of nepotism in the Personnel Office when a mother and daughter report to the same supervisor. The issue could effect or adversely influence safety, security, morale, fair as well as and impartial supervision.

Plant Operations:

- There are several deficiencies related to managing emergency generators. For example:
 - There are no local operating procedures.
 - Testing dates are not logged.
 - Log books do not identify the asset number, start time, end time and are disorganized.
 - Fuel purchased, delivered, and used, is not adequately documented.
 These issues make it difficult to determine and validate that emergency generators are tested timely and properly maintained.
- The following deficiencies are noted regarding the cross-connection program (i.e., backflow):
 - The master list does not reconcile to asset history reports.
 - It could not be determined whether backflow devices are tested annually and those that failed were tested and subsequently repaired or surveyed.
 - There is no published cross-connection schedule for 2008.
 These issues result in difficulty locating backflow devices and determining whether tests have been performed.
- The preventive maintenance (PM) of the heating, ventilation, and air conditioning is inadequate. This issue may render the PM program ineffective, decrease efficiency, increases downtime, and may result in additional costs.

The methods of a PM program are not being adhered to. For example:

- PM procedures have not been approved by the Associate Warden of Business Service and the Warden.
- Asset history reports are not requested or reviewed by supervisors.
- A PM program is not adhered to in Food Services for 83 percent of the equipment.
- Equipment/assets are not always clearly identified with the standard equipment code. One hundred percent of assets tested in Food Services are not tagged.

These conditions may render the PM program ineffective, decrease efficiency, increase downtime, and result in additional costs.

- The Plant Operations Maintenance Report does not accurately reflect Plant Operations activities. For example, hours and staff are understated, and priorities are inaccurate. These issues result in inaccurate information provided to management for decision making.
- The Inmate Work Supervisors Timekeeping Log, CDC 1697 is not properly maintained. For example,
 - Reasons for using Exceptional Time are not documented.
 - Unauthorized duplications are used.
 - There are no Inmate Work Training Incentive Program guidelines.
 These issues result in inaccurate documentation of inmate work time.

Food Services:

The Audits Branch performed a health, safety, and sanitation inspection of the general kitchen and 13 of the 19 satellite kitchens. See the Preliminary Report, Attachment B for deficiencies by locations. These issues result in unsanitary conditions, possible food contamination, food borne illness, increased risk of vermin, potential for bacteria growth, workplace hazards causing injury to staff and inmates, and unacceptable risks.

Information Security

Staff Computing Environment:

- Annual Self-Certification of Information Security Awareness and Confidentiality forms are not on file.
- Information security training is not current.
- Anti-virus updates are not current.

Inmate Education Programs

Education Administration:

The education program has not been accredited by Western Association of Schools and Colleges since it opened several years ago. KVSP has the only education program in California Department of Corrections and Rehabilitation (CDCR) that is not accredited. KVSP is not currently testing for General Education Development, and there is no High School program. Test of Adult Basic Education (TABE) scores are not consistently

recorded on the CDCR Form 154 cards. No copies of the Record of Inmate Achievement (CDCR Form 154) are kept. (Repeated from 2007)

Academic Education:

Students are not uniformly being tested on the TABE or the Comprehensive Adult Student Assessment System Test. KVSP has extremely low Comprehensive Adult Student Assessment System Post-Test Pay Points. There is no documented evidence to support any of the Transforming Lives Network activities. There is no documented evidence that inmates are participating in any Transforming Lives Network activities. (Repeated from 2007)

There are several teachers who do not know the requirements for issuing certificates of completion and certificates of accomplishment. Some teachers have lesson plans that do not agree with the CDCR's approved curriculum. The test coordinator does not have a computerized master inventory of the test books or answer sheets. There is a manual inventory of the test booklets only. There is no inventory of the answer sheets.

Vocation Education:

Most of the student files reviewed did not have a TABE test score in the file. None of the teachers are issuing or recording elective credits for their students. (Repeated from 2007)

The Office Services and Related Technologies teachers have not received Microsoft certification training, needed to issue the appropriate Microsoft certification. The funding for Microsoft training has been requested from the Department of Education, Vocations and Offender Programs, by the Office of Correctional Education. (Repeated from 2007)

The welding program has been open for over one year and is still not operational. The welding teacher does not have the necessary equipment and supplies to provide the training for the National Center for Construction Education and Research, as well as, the American Welding Society industry certifications. (Repeated from 2007)

The auto mechanics program is unable to provide the training to issue the Automotive Service of Excellence certification, due to lack of tools, equipment, and hands-on-training projects. The auto mechanics teacher indicated that his program received donations of two automobiles in June 2008. Also, recently a 4-wheel drive pick-up was donated, but he has not been allowed to bring the vehicles into the Institution. These would provide the hands-on-training necessary to learn this trade. He has also requested from the Principal to offer Employee Services to the staff, thus providing additional hands-on-training projects for the students. It is recommended that the principal work with the institutional managers to identify and locate the original equipment and supplies ordered and delivered that were paid from the Capital Outlay funds. (Repeated from 2007)

The TABE should be administered according to the testing matrix. Some of the student files indicated that the test matrix was not being followed. Some of the teachers were not aware that the TABE locator test is available and when it is appropriate to

administer when testing the students. Not all the files had the Test of Adult Basic Education subtests in the student file. (Repeated from 2007)

Inmate Appeals

Access to Inmate Appeals: KVSP does not provide the orientation inmates a written summary of the inmate's right to appeal procedures. Additionally, KVSP does not provide the inmates verbal staff instruction regarding the inmate's right to appeal and appeal procedures.

Preparation of Appeals: The dates on the appeal do not correspond with the dates on the Inmate Automated Tracking System (IATS). Additionally, not all of the appeals are complete. On numerous appeals, the "return to the inmate" date, at all levels, was missing.

Ad Seg Bed Utilization

This review is presented in three separate case groups (i.e. Disciplinary Process, Incident Report Processing, and Safety Concerns Investigation).

Disciplinary Process:

1. Hearing to Facility Captain Review: Time from the date of the Rules Violation Report (RVR) hearing to the date the RVR was audited by the Facility Captain ranged from 3 days to 87 days. The expectation is within 5 working days. Of the cases reviewed, 21 percent met this expectation.
2. Facility Captain to Chief Disciplinary Officer Review: Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer (CDO) ranged from 0 (as in same day as Captain's review) days to 28 days. The expectation is within 3 working days. Of the cases reviewed, 46 percent met this expectation.
3. Chief Disciplinary Officer to ICC review: Time from date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from 0 days (as in reviewed by ICC the same day of CDO signature) to 68 days. The expectation is within 14 days. Of the cases reviewed, 23 percent met this expectation.

Incident Report Processing:

The lack of District Attorney (DA) referral information in the files, combined with the non-standardized information in the Log pertaining to each incident report, contributed to the reviewers' inability to extract sufficient data for fair representation and examination of incident report processing time frames. Therefore these areas were not evaluated. Although not formally evaluated, the timeliness of the DA screen-out by Investigative

Services Unit (ISU) should be monitored as there seemed to be excessive time lapse from the date of the incident to the date ISU determined referral to the DA would not be made. The following is provided for informational purposes:

Regarding date of the incident occurrence to the date ISU receives the Crime Incident Report (CDC 837). According to the Deputy Director's Memorandum dated March 26, 2003, the complete package will be presented to ISU within 21 calendar days.

Regarding date ISU receives the CDC 837 to DA screen-out or referral. According to the Deputy Director's Memorandum dated March 26, 2003, the expectation is that the time should not exceed 5 working days.

Regarding DA Referral to Resolution. This is one area that the Institution has no definitive control over. However, it is suggested that the Institution work closely with the DA's office to track the decision making process to resolution, of either acceptance of the case for prosecution or rejection of the case for prosecution.

Safety Concern Investigations:

Investigation Initiation to Completion: Time from the date of referral to staff for investigation to the date the investigation was concluded ranged from 0 days (as in completed same day of referral) to 218 days. One 218 day case was well outside of the normal completion of investigation time-frames. It involved an inmate originally placed into the Administrative Segregation Unit (ASU) due to safety concerns, who also received an RVR for Attempted Battery on Staff while in ASU. The expectation is to be within the 30 calendar days. Of the cases reviewed, 50 percent met this expectation.

Investigation Completion to ICC Review: Time from conclusion of the investigation to ICC review of investigation results ranged from 0 days (as in case seen by ICC the same date the investigation concluded) to 64 days. The ICC should review the inmate's case within 14 days. Of the cases reviewed, 46 percent met this expectation.

Radio Communication

KVSP is in compliance with radio communication.

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Case Records

Holds, Warrants and Detainers. There were 43 Central Files of recently paroled inmates and an additional 24 Central Files for Holds, Warrants, and Detainers (HWD) files for a total of 67 Central Files reviewed.

In the HWD portion of the audit, 16 components were reviewed. There were 5 areas listed below that need to be brought into compliance with the current policies and procedures:

- Holds are not being dropped or entered in the KCHD system [Offender Base Information System, (OBIS)] pursuant to Departmental Policy.
- Desk procedures need to be updated to ensure all current Instructional Memorandums pertaining to the HWD processes are incorporated into the procedures.
- Warrant information is not accurately reflected in Automated Release Date Tracking System, OBIS and on the Chronological History, CDC 112.

- Provide training to appropriate staff to ensure the Detainer Summary, CDC 850 is being properly prepared to include, but not limited to, the date of initiation, date and time of hold placed, as well as the Evaluator Section completed.
- Ensure all holds, whether received by fax, teletype or mail, is date and time stamped.

Warden's Checkout Order. In the Warden's Checkout Order (CDC Form 161) portion of the audit, three components were reviewed. There are two areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- The Early/Late Release Reports are not being submitted in a timely manner.
- The CDC Form 161 needs to reflect the time of release pursuant to DOM, Section 74070.21.

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Risk Management

Worker's Compensation. Worker's Compensation training is not provided to Supervisors and Managers, a Cal OSHA log is not kept for inmate claims, and duty statements do not include marginal and essential functions or physical and mental demands of all classifications for the Return to Work Program.

Fire, Life, Safety, Systems – Equipment. The annual extrication equipment maintenance is not performed and the exhaust fan is not installed in the truck bay. Additionally, there is a lack of maintenance and testing of smoke detectors in all housing units which is causing complete default of all systems. Finally, the used oil storage area does not have: 1) a rain cover to eliminate rain from entering the secondary storage containment system and 2) a sign posted identifying the product stored at that location.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION
AND
DUE PROCESS

KERN VALLEY STATE PRISON

DECEMBER 1 THROUGH DECEMBER 12, 2008



PRELIMINARY

CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

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Review of Administrative Segregation and Due Process

Kern Valley State Prison

INTRODUCTION

This review of administrative segregation (Ad Seg) operations and due process provisions at the Kern Valley State Prison (KVSP) was conducted by the Compliance/Peer Review Branch (CPRB), Office of Audits and Compliance, between the dates of December 1-4, 2008. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation's (CDCR) Department Operations Manual (DOM), CDCR's Use of Force Policy, Administrative Bulletins (AB) 95/3R and 99/03, and Information Bulletins (IB) as the primary sources of operational standards. In addition, applicable court-ordered minimum standards established under **Toussaint v. Gomez** were used in this review as a benchmark for litigation avoidance.

This review was conducted by Tony Alleva, Facility Captain; Dave Stark, Correctional Counselor (CC) II; Mike Brown, CC II; Chuck Lester, CC II; and Nancy Fitzpatrick, Associate Governmental Program Analyst, of the CPRB.

The review consisted of an on-site inspection, interviews with staff and inmates, reviews of procedures and other documentation, and observation of institutional operations.

The purpose of the CPRB review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations and court-established standards.

Each area was reviewed by a minimum of two primary reviewers and cross-verified by other members of the team as possible. Overall, findings presented in the attached report represent the consensus of the entire review team.

Review of Administrative Segregation and Due Process

Kern Valley State Prison

REVIEW SCOPE AND METHODOLOGY

The CPRB conducted an on-site review at KVSP during the period of December 1-4, 2008. The purpose of this review was to assess the level of compliance with established State regulations and court-established standards in the areas of Ad Seg operations and due process provisions. This review and the attached findings represent the formal review of KVSP's compliance by CPRB.

The scope and methodology of this review was based upon written review procedures developed by CPRB and provided to KVSP's staff in advance of the review.

Random sampling techniques were employed as an intrinsic part of the review process.

For the purposes of this review, facilities were toured by members of the review team, cell and tier inspections were conducted in the units, and randomly selected inmates were informally interviewed based upon their interest and willingness to talk to the reviewers.

Throughout the tour, on-duty staff at all levels (medical, counseling, management, administration, custody, and non-custody) were interviewed regarding current practices.

A random sample of 30 central files was reviewed. Utilizing "point-in-time" methodology, files were evaluated against all administrative requirements pertaining to the documents contained in those files.

Review of Administrative Segregation and Due Process

Kern Valley State Prison

COMPLIANCE RATING BY SUBJECT AREA

SECTION REVIEWED	NO. OF ITEMS REVIEWED	NO. OF ITEMS NOT RATABLE	NO. OF ITEMS IN COMPLIANCE	SECTION SCORE
Conditions of Segregated Housing	30	3	23	85%
Due Process	22	0	17	77%
Administration	10	0	7	70%

Review of Administrative Segregation and Due Process

Kern Valley State Prison

EXECUTIVE SUMMARY

During this formal review of compliance with State regulations and court-established standards regarding Ad Seg operations and due process provisions at KVSP, the Facility was found to be in compliance with 47 (80 percent) of the 59 ratable areas. Three areas were found to be not ratable during this review.

Areas of concern were found as follows:

- **Exercise.** The walk-alone yard group designation in Units B1 and B2 are only receiving four hours of outside exercise per week.
- **Significant Information on the Isolation/Segregation Profile (CDC 114-A).** The review revealed that a CDC 114-A is maintained for each inmate assigned to the Ad Seg units. Although the CDC 114-As were found to contain significant information, in chronological order, relating to the inmate during the course of segregation, fish kits, cell inspections, and exercise were not consistently documented.
- **Inmate Segregation Profile (CDC 114-A1) 90-day Update.** The review revealed that in a random sample of 32 CDC 114-A1s reviewed, 9 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require a 90-day update. Of the 23 ratable CDC 114-A1s, 17 (77 percent) were updated as required.
- **Fire Drills.** Of the 48 required simulated emergency fire drills, 18 (38 percent) were completed as required.
- **Administrative Review.** Of the 30 records reviewed, 22 (73 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 8 remaining records, 5 documented a late countersignature by the Associate Warden (1 to 3 days) when the review was conducted by an acting Captain and 3 records documented a late review by a Captain (1 day).

- **Witnesses on the Administrative Segregation Unit Placement Notice (CDC 114-D).** Of the 30 records reviewed, 26 (87 percent) contained documentation regarding the need for witnesses. The 4 remaining records left this section blank.
- **Classification Hearing Within 10 Days.** Of the 30 records reviewed, 26 (87 percent) contained documentation of an Institution Classification Committee (ICC) review within 10 days of an inmate's placement in Ad Seg. The 4 remaining records documented a late ICC review (1 to 5 days).
- **Determinations Documented on the Classification Chrono (CDC 128-G).** Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Of the 23 ratable records, 19 (83 percent) contained documentation of the determination arrived at during the ICC on the CDC 128-G. The 4 remaining records did not address the due process violation of a late ICC on the CDC 128-G.
- **Witnesses on the CDC 128-G.** Of the 30 records reviewed, 27 were not ratable as the need for witnesses was properly documented on the CDC 114-D or the CDC 128-G had not yet been typed. Of the 3 remaining records, 2 (67 percent) properly documented the need for witnesses as required. The 1 remaining CDC 128-G did not contain this information.
- **Training.** Documentation provided indicated that 88 custody staff have been assigned to Ad Seg for 1 year or more. These 88 staff members are each required to have received 11 specialized training classes. Of the 968 required specialized training classes, 842 (87 percent) have been taken.
- **Signing Post Orders.** The review revealed there are 124 identified staff who are assigned to 72 Ad Seg posts. Of the 157 required signatures, 102 (65 percent) were present acknowledging the understanding of the post orders.
- **Post Order Supervisory Review.** The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the Ad Seg units read and understand their post order upon assuming their post.

A complete description of these finding areas may be found in the narrative section of this report.

Review of Administrative Segregation and Due Process

Kern Valley State Prison

SUMMARY CHART (SYMBOL DEFINITIONS)

The following chart represents individual review findings in relation to the CCR, Title 15, DOM, PC, and ABs. In addition, applicable court-ordered minimum standards established under Toussaint v. Gomez are being used in this review as a benchmark for litigation avoidance.

Each of the items is rated as to whether or not the Institution is in compliance. The chart utilizes the following symbols to denote compliance ratings:

SYMBOL	DEFINITION
Compliance (C)	The requirement is being met.
Partial Compliance (P/C)	The institution is clearly attempting to meet the requirement, but significant discrepancies currently exist.
Noncompliance (N/C)	The institution is clearly not meeting the requirement.
Not Applicable (N/A)	Responsibility for compliance in this area is not within the authority of this institution.
Not Ratable (N/R)	No measurable instances.

At the end of the chart is a Comparative Statistical Summary Chart of Review Findings. This summary presents a mathematical breakdown of compliance by total items and percentages (%).

Review of Administrative Segregation and Due Process

Kern Valley State Prison

SUMMARY CHART

REVIEW STANDARD	REVIEW FINDING 1/06	REVIEW FINDING 12/08	PAGE NO.
I. CONDITIONS OF SEGREGATED HOUSING			
1. Living Conditions.	C	C	1
a. Housekeeping and Maintenance.	C	C	2
b. Vector Control.	P/C	C	2
2. Restrictions.	C	C	3
3. Clothing.	C	C	3
4. Meals.	C	C	4
5. Mail.	C	C	4
6. Visits.	C	C	5
7. Personal Cleanliness.			
a. Showering.	C	C	5
b. Haircuts.	C	C	6
c. Laundry Items.	C	C	6
8. Exercise.	P/C	P/C	7
9. Reading Material.	C	C	7
10. Rule Changes.	P/C	C	8

REVIEW STANDARD	REVIEW FINDING 1/06	REVIEW FINDING 12/08	PAGE NO.
11. Telephones.	C	C	8
12. Institution Programs and Services.	C	C	9
13. Visitation and Inspection.	C	C	9
a. Medical Attention.	C	C	10
14. Management Cells.			
a. Placement.	P/C	N/R	11
b. Reporting.	N/C	N/R	11
c. Transfer.	C	N/R	12
15. Access to the Courts.	C	C	12
16. Isolation Log Book (CDC 114).	C	C	13
17. The CDC 114-A.			
a. All significant information documented.	C	C	13
b. The CDC 114-A1 notes yard group designation.	C	C	14
c. The CDC 114-A1 notes special information.	C	C	14
d. The CDC 114-A1 is updated every 90 days.	C	P/C	14
18. Safety.			
a. Fire Safety.	C	C	15
b. Quarterly Fire Drills.	N/C	P/C	16
c. Documentation.	N/C	C	16

REVIEW STANDARD	REVIEW FINDING 1/06	REVIEW FINDING 12/08	PAGE NO.
II. DUE PROCESS			
1. Authority.	C	C	17
2. Written Notice.	C	C	17
3. Receipt of the CDC 114-D.	C	C	18
4. Confidential Material.	N/R	C	18
5. Review.	N/C	P/C	19
a. Staff Assistance.	P/C	C	19
b. Witnesses.	P/C	P/C	20
c. Inmate Waiver of Time Limitations.	C	C	20
d. Hearing Time Constraints.	C	C	21
e. Decision.	C	C	21
6. Hearing Within 10 Days.	C	P/C	22
a. Determinations documented on the CDC 128-G.	C	P/C	22
b. Hearing Date.	C	C	23
c. Inmate Presence.	C	C	23
d. Hearing Officer.	C	C	24
e. Staff Assistant (SA)/Investigative Employee (IE) on the CDC 128-G.	C	C	24
f. Witnesses on the CDC 128-G.	N/C	P/C	25
g. The CDC 128-G notes yard group designation.	C	C	25

REVIEW STANDARD	REVIEW FINDING 1/06	REVIEW FINDING 12/08	PAGE NO.
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h. Cell Status.	C	C	26
i. Participation.	C	C	26
7. Classification Review.	C	C	27
8. Classification Staff Representative (CSR) Review.	C	C	27

III. ADMINISTRATION			
1. Training.	N/R	P/C	28
2. The ICC.	C	C	28
3. Record of Disciplinary.	C	C	29
4. Post Orders-Firearms.	N/C	C	30
5. Post Order-Job Site.	P/C	C	30
6. Signing of Post Orders.	P/C	P/C	31
a. Post Orders-Staff.	P/C	P/C	31
b. Supervisor Inspection.	C	C	32
c. Post Order-Acknowledgment.	C	C	32
7. Protective Vests.	C	C	32

Formal Review of Administrative Segregation and Due Process

Kern Valley State Prison

COMPARATIVE STATISTICAL SUMMARY CHART

JANUARY 2006—DECEMBER 2008 REVIEW FINDINGS

RATING	TOTAL 1/06	RATING % 1/06	TOTAL 12/08	RATING % 12/08
COMPLIANCE	51	78%	47	80%
PARTIAL COMPLIANCE	9	14%	12	20%
NONCOMPLIANCE	6	8%	0	
NOT RATABLE	4		3	
TOTAL	70	100%	62	100%

Formal Review of Administrative Segregation and Due Process

Kern Valley State Prison

SUMMARY OF FACILITIES REVIEWED

KVSP includes 696 Ad Seg beds in this Level I and IV Facility. At the time of this review, the Facility was housing 510 Ad Seg inmates.

For the purposes of the review, the CPRB team toured the Ad Seg units, reviewed unit records, and interviewed unit staff to determine the degree of compliance with established departmental policy, procedures, guidelines, and relevant court-established standards.

I

CONDITIONS OF SEGREGATED HOUSING

1. **Living Conditions.** In keeping with the special purpose of a segregated housing unit, and with the degree of security, control, and supervision required to serve that purpose, the physical facilities of special purpose segregated housing will approximate those of the general population.
(Authority cited: PC, Sections 2084, 5054, and 5058. Reference: CCR, Title 15, Sections 3343(a) and 3345; and DOM, Section 52080.33.)

Findings

COMPLIANCE

The CPRB review team toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the physical facilities of KVSP's Ad Seg units approximate those of the general population.

- a. Housing units and all facilities therein will be properly maintained and regularly inspected to insure human decency and sanitation.
(Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in KVSP's Ad Seg units are provided a clean, properly maintained cell that approximates those of general population inmates. Written repair requests are generated in the unit and submitted to Plant Operations when repairs are needed with emergency work requests responded to in a timely manner.

- b. Control of vermin and pests will be maintained by a regular inspection by the institutional vector control.
(Authority cited: Toussaint v. McCarthy. Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that KVSP's Ad Seg units control vermin and pests by conducting regular inspections of the unit. Regular inspections and pesticide applications provide for the control of vermin and pests. In the event of an infestation, the Ad Seg Sergeants notify Plant Operations and the situation is responded to immediately. It should be noted that Operational Procedure 200 does not address vector control.

2. **Restrictions.** Whenever an inmate in Ad Seg is deprived of any usually authorized item or activity and the action and reason for that action is not otherwise documented and available for review by administrative and other concerned staff, a report of the action will be made and forwarded to the unit administrator as soon as possible.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(b); and DOM, Section 52080.33.1.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that Ad Seg staff utilize an Informational Chrono (CDC 128-B) when an inmate in Ad Seg is deprived of any usually authorized item or activity.

3. **Clothing.** No inmate in Ad Seg will be required to wear clothing that significantly differs from that worn by other inmates in the unit, except that temporary adjustments may be made in an inmate's clothing as is necessary for security reasons or to protect the inmate from self-inflicted harm. No inmate will be clothed in any manner intended to degrade the inmate.
(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(c); and DOM, Section 52080.33.2.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed no instances wherein inmates housed in the Ad Seg units were required to wear clothing that significantly differed from that worn by other inmates in the unit; nor were inmates clothed in a manner intended to degrade or humiliate. Additionally, jackets are being provided for inmate use for outdoor exercise during inclement weather.

4. **Meals.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be fed the same meal and ration as is provided for inmates of the general population, except that a sandwich meal may be served for lunch. Deprivation of food will not be used as punishment.
(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(d); and DOM, Section 52080.33.3.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, reviewed unit documentation, observed the breakfast and dinner meals, and interviewed unit staff and inmates.

The review revealed that inmates housed in the Ad Seg units are receiving the same meals and rations as provided for the general population inmates. No examples of food deprivation were found.

Food items are prepared in the Unit B1 and B2 Dining Hall and transported to the Unit B1 and B2 housing where staff serve the inmate population. Food items for the Ad Seg Stand Alone Units are delivered from the main kitchen in bulk hotel pans. Unit staff prepare individual trays in the unit to serve to the inmate population. Meal sample reports are being utilized and food temperatures are being maintained by the Food Service Department.

5. **Mail.** Inmates assigned to Ad Seg, including special purpose segregated housing, will not be restricted in their sending and receiving of personal mail, except that incoming packages may be limited in number, and in content, to that property permitted in the segregated unit to which an inmate is assigned.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Sections 3138 and 3343(e); and DOM, Section 52080.33.4.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in Ad Seg are not restricted from either sending or receiving personal mail, except those restrictions as defined in the CCR.

6. **Visits.** Inmates assigned to segregated housing, except for inmates assigned to security housing units (SHU), in accordance with Section 3341.5, shall be permitted to visit under the same conditions as are permitted inmates of the general population. Inmates assigned to SHUs shall be prohibited from physical contact with visitors.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(f); and DOM, Section 52080.33.5.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that all Ad Seg inmates are restricted to noncontact visits. The review team found KVSP's Ad Seg visiting process to be in accordance with current departmental and institutional policy and procedures.

7. **Personal Cleanliness.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be provided the means to keep themselves clean and well groomed.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(g); and DOM, Section 52080.33.6.)

- a. Showering and shaving will be permitted at least three times a week.

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that shower facilities exist in the Ad Seg units and on the exercise yard. Ad Seg inmates are provided the opportunity to shower three times per week. Razors for shaving are provided during shower periods.

- b. Haircuts will be provided as needed.

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that haircutting equipment is provided, upon request, for use in the dry cell area in the Ad Seg Stand Alone Units and on the mini-yard sallyport for Units B1 and B2.

- c. Clothing, bed linen, and other laundry items will be issued and exchanged no less often than is provided for general population inmates.

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that clothing, bed linen, and other laundry items are routinely issued upon reception in the Ad Seg units. These laundry items are exchanged on the same basis as the general population.

8. **Exercise.** Inmates assigned to special purpose segregation housing will be permitted a minimum of one hour per day, five days a week, of exercise outside their rooms or cells unless security and safety considerations preclude such activity. When special purpose segregated housing units are equipped with their own recreation yard, the yard periods may substitute for other out of cell exercise periods, providing the opportunity for use of the yard is available at least three days per week for a total of not less than ten hours a week.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(h).)

Findings

PARTIAL COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that KVSP's Ad Seg units provide controlled compatible, reintegrated mixed, and walk-alone yard group designations. Controlled compatible and reintegrated mixed yard group designations housed in Unit B1 and B2 are being offered the required three exercise periods per week, for a minimum of ten hours of outdoor exercise. However, the walk-alone yard group designation in Units B1 and B2 are only receiving four hours of outside exercise per week. All yard group designations in the Ad Seg Stand Alone Units are receiving a minimum of ten hours of outdoor exercise as required.

9. **Reading Material.** Inmates assigned to Ad Seg, including special purpose segregated housing, will be permitted to obtain and possess the same publications, books, magazines, and newspapers as are inmates of the general population, except that the quantity may be limited for safety and security reasons. Library services will be provided and will represent a cross-section of material available to the general population.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(i).)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that Ad Seg inmates are provided library books on a weekly basis. The books are requested from the unit Legal Officer, who distributes the reading material weekly.

10. **Rule Changes.** The Notice of Change to the CCR shall be posted and made available to all inmates and staff. Notices shall be posted in inmate housing units, corridors, and other areas easily accessible to inmates, and provided to inmate lock-up units. The Classification and Parole Representative shall ensure that the inmate population has knowledge of the Board of Prison Terms/Narcotic Addiction Evaluation Authority Rules and of amendments.
(Authority cited: PC, Sections 2080 and 5058(a). Reference: DOM, Sections 12010.5.8 and 12010.8.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the Ad Seg units post proposed changes or changes to the Director's Rules, DOM, ABs, and memorandums that affect the inmate population in a conspicuous location.

11. **Telephones.** Institutions will establish procedures for the making of outside telephone calls by inmates in Ad Seg. Such procedures will approximate those for the work/training incentive group to which the inmate is assigned, except that individual calls must be approved by the supervisor in charge or the administrator of the unit before a call is made.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(j).)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that KVSP provides Ad Seg inmates telephone usage pursuant to CCR, Title 15, Section 3343 (j). This includes emergency usage only.

12. **Institution Programs and Services.** Inmates assigned to segregated housing units will be permitted to participate and have access to such programs and services as can be reasonably provided within the unit without endangering the security or the safety of persons. Such programs and services will include, but are not limited to: education, commissary, library services, social services, counseling, religious guidance, and recreation.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(k).)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that KVSP provides programs to include commissary, library services, and recreation. Presently, there is one religious leader on staff at the Institution. Therefore, availability for Ad Seg inmates is limited.

13. **Visitation and Inspection.** Inmates assigned to Ad Seg, including special purpose segregated units, will be seen daily by the custodial supervisor in charge of the unit and by a physician, registered nurse, or medical technical assistant and, by request, members of the program staff. A timely response should be given to such requests wherever reasonably possible.
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(l).)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that a custody supervisor is assigned to the Ad Seg units on both Second and Third Watches. In addition, management staff are available for interviews prior to the ICC hearings and CDC 114-D segregation placement administrative reviews. The Facility Sergeants tour the units during First Watch to ensure any emergency is properly addressed. The medical and psychiatric staff tour the units on Second and Third Watches passing out medication, collecting sick call slips, and screening for medical and mental health needs.

- a. The custodial officer in charge of a disciplinary detention unit, segregation unit, or SHU, where inmates are segregated for disciplinary or administrative purposes, will ensure that inmates needing medical attention receive it promptly.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3345.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit custody staff notify medical staff in the event of any medical situation or emergency. The general medical treatment line is conducted on Tuesdays and Friday in Units B1 and B2. The general medical treatment line is conducted daily in the Ad Seg Stand Alone Units. First Watch medical emergencies are responded to by the medical staff assigned to the clinics. In addition, as stated above, medical staff tour and psychiatric staff are assigned to the units daily.

14. **Management Cells.** Inmates assigned to segregated housing, who persist in disruptive, destructive, and dangerous behavior, and will not heed or respond to orders and warnings to desist, are subject to placement in a management cell, as provided in CCR, Title 15, Section 3332(f).

(Authority cited: PC, Sections 2601(d), 5054, and 5058. Reference: CCR, Title 15, Section 3343(m).)

- a. An inmate who persists in unduly disruptive, restrictive, or dangerous behavior, and who will not heed or respond to orders and warnings to desist from such activity, may be placed in a management cell on an order of the unit's administrator or, in his or her absence, an order of the watch commander.

Findings

NOT RATABLE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that KVSP does not maintain management cells.

- b. In addition to any necessary incident or disciplinary reports, the matter will be reported to the Warden, Superintendent, Chief Disciplinary Officer, or Administrative Officer of the Day (AOD), one of whom will review management cell resident status daily.

Findings

NOT RATABLE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that KVSP does not maintain management cells.

- c. An inmate, who requires management cell placement for longer than 24 hours, will be considered for transfer to a psychiatric management unit or other housing appropriate to the inmate's disturbed state.

(Reference: CCR, Title 15, Section 3332(f); and DOM, Section 52080.22.4.)

Findings

NOT RATABLE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that KVSP does not maintain management cells.

15. **Access to the Courts.** Inmates confined in Ad Seg for any reason will not be limited in their access to the courts. If an inmate's housing restricts him or her from going to the inmate law library, arrangements will be made to deliver requested and available library material to the inmate's quarters.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3164(a) and (d); DOM, Section 53060.10; and Toussaint v. Gomez.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff and inmates.

The review revealed KVSP's Ad Seg units provide direct access to a law library. Inmates submit written requests for law library services to the Law Librarian who screens the requests and schedules the inmates for access. Preferred legal users and inmates with court deadlines receive priority access.

16. **Ad Seg Log.** A CDC 114, will be maintained in each Ad Seg, including special purpose segregated units. One CDC 114 may serve two or more special purpose units which are administered and supervised by the same staff members.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(a); and DOM, Section 52080.22.5.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114 is maintained within the units. All entries are appropriately recorded in accordance with departmental policy and procedures.

17. **Isolation/Segregation Record.** A separate record will be maintained for each inmate assigned to Ad Seg, including special purpose segregated units. This record will be compiled on a CDC 114-A and a CDC 114-A1.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(b); DOM, Section 52080.22.5; and IB 98/27.)

- a. All significant information relating to the inmate during the course of segregation, from reception to release, will be entered on the CDC 114-A in chronological order.

Findings

PARTIAL COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114-A is maintained for each inmate assigned to the Ad Seg units. Although the CDC 114-A's were found to contain significant information, in chronological order, relating to the

inmate during the course of segregation, fish kits, cell inspections, and exercise were not consistently documented on the CDC 114-A.

- b. The CDC 114-A1 documents the inmate's current yard group designation.

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review team examined a random sample of 30 CDC 114-A1s. Of the 32 CDC 114-A1s reviewed, 2 were not ratable as the inmate had not yet attended ICC. Of the 30 ratable CDC 114-A1s, 28 (93 percent) documented the inmate's current yard group designation. The 2 remaining CDC 114-A1s did not contain this information.

- c. The CDC 114-A1 documents the inmate's special information.

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that each (100 percent) of the 32 randomly selected CDC 114-A1s reviewed documented the inmate's special information.

- d. The CDC 114-A1 will be maintained in the segregation log and be updated as new information is obtained. The Segregation Officer shall begin a new CDC 114-A1 at least every 90 days or at anytime this form becomes difficult to read.

Findings

PARTIAL COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that in a random sample of 32 CDC 114-A1s reviewed, 9 were not ratable as the inmate had not been on Ad Seg status for a period of time long enough to require a 90-day update. Of the 23 ratable CDC 114-A1s, 17 (77 percent) were updated as required.

18. **Safety.** Each Warden and Superintendent must have in effect, at all times, a plan approved by the Director for meeting emergencies delineated and required by the California Emergency Services Act of 1970.
(Authority cited: PC, Sections 5454 and 5458. Reference: CCR, Title 15, Sections 3302(b)(4) and 3303(a)(4); and DOM, Sections 52090.1, 2, 5, 6.1, 7, and 52090.19.)

- a. Institution heads shall maintain procedures for fire prevention and suppression. Fire protection practices and departmental policy mandate that all employees be instructed and trained concerning their duties and responsibilities should it become necessary to conduct an emergency evacuation for any fire or life threatening condition.
(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 2090.19.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that KVSP's Ad Seg units maintain a written policy which specifies the units' fire prevention regulations and practices and that staff have been trained in this policy.

- b. Staff and inmates shall be familiar with fire evacuation routes, exits, and procedures. An evacuation drill shall be conducted quarterly on each watch. Where such drills would jeopardize personal safety or Facility security, staff shall conduct a walk-through of the procedure. Such walk-through drills shall be monitored by the area supervisor to ascertain that actual evacuation could be accomplished as required.
(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 52090.19.)

Findings

PARTIAL COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that staff are trained with emergency evacuation plan procedures and evacuation routes are conspicuously posted within the units. However, documentation was not present to support that quarterly simulated emergency fire drills, under varied conditions, are being conducted during all three watches. Of the 48 required simulated emergency fire drills, 18 (38 percent) were completed as required.

- c. At the conclusion of fire drills, the area supervisor shall complete a [Fire Drill Report] DS 5003 indicating the necessary information and forward a copy to the Fire Chief.
(Reference: CCR, Title 15, Section 3303(a)(4); and DOM, Section 52090.19.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that when simulated fire drills are conducted, the DS 5003s are being completed and forwarded to the Fire Chief as required.

II

DUE PROCESS

Procedural safeguards are essential for effective transfers of prisoners from the general prison population to a maximum security unit in order to segregate such prisoners for administrative reasons or purposes.

1. **Authority.** Authority to order an inmate to be placed in Ad Seg, before such action is considered and ordered by a classification hearing, may not be delegated below the staff level of Correctional Lieutenant, except when a lower level staff member is the highest ranking official on duty.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336; and DOM, Section 52080.25.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 27 (90 percent) contained documentation on the CDC 114-D to confirm the level of the official ordering segregation placement was at the Correctional Lieutenant level or higher. The 3 remaining records documented authorization below the staff level of Correctional Lieutenant (acting Lieutenant, acting CC II, and CC I).

2. **Written Notice.** The reason for ordering an inmate's placement in Ad Seg will be clearly documented on a CDC 114-D by the official ordering the action at the time the action is taken.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336(a); DOM, Section 52080.25; and IB 98/27.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained a clearly stated date and reason(s) for placement on the CDC 114-D.

3. **Receipt of CDC 114-D.** A copy of the CDC 114-D with the "order" portion of the form completed, will, if practical, be given to the inmate prior to placement in Ad Seg, but not later than 48 hours after such placement.
(Authority: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3336(d) and 3339(b)(1); and DOM, Section 52080.25.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation that indicated the inmates were given a copy of the CDC 114-D within 48 hours of placement. The 1 remaining record left this section blank.

4. **Confidential Material.** Documentation given the inmate concerning information from a confidential source shall include an evaluation of the source's reliability, a brief statement of the reason for the conclusion reached, and a statement of the reason why the information or source is not disclosed.
(Authority: PC, Sections 2081.5, 2600, 2601, 5054, and 5058. Reference: CCR, Title 15, Section 3321(b)(2); and DOM, Sections 52080.27.4 and 61020.9.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 22 were not ratable as the reason for placement was not based on confidential information. Each (100 percent) of the 8 ratable records contained an appropriate Confidential Information Disclosure form (CDC 1030) issued within the required time frames.

5. **Review.** On the first work day following an inmate's placement in Ad Seg, designated staff at not less than the level of Correctional Captain will review the order portion of the CDC 114-D. If retention in Ad Seg is approved at this review, the following determinations will be made at this level
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3337).)

Findings

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 22 (73 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in Ad Seg. Of the 8 remaining records, 5 documented a late countersignature by the Associate Warden (1 to 3 days) when the review was conducted by an acting Captain and 3 records documented a late review by a Captain (1 day).

- a. Determine the appropriate assignment of staff assistance.
(Reference: CCR, Title 15, Section 3337(a).)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation of a determination for the assignment of a SA/IE. The 1 remaining record left this section incomplete.

- b. Determine the inmate's desire to call witnesses or submit other documentary evidence. If the inmate requests the presence of witnesses or submission of documentary evidence at the classification hearing on the reason or need for retention in segregated housing, IE will be assigned to the case. A request to call witnesses must be submitted in writing by the inmate.

(Reference: CCR, Title 15, Section 3337(b).)

Findings

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 26 (87 percent) contained documentation regarding the need for witnesses. The 4 remaining records left this section blank.

- c. Determine if the inmate has waived the 72-hour time limit in which a classification hearing cannot be held, as indicated on the CDC 114-D, or the inmate desires additional time to prepare for a classification hearing.

(Reference: CCR, Title 15, Section 3337(c).)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 28 (93 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. The 2 remaining records documented the inmate had waived the 72-hour preparation time absent a signature by the inmate.

- d. Determine the most appropriate date and time for a classification hearing based upon the determination arrived at under Section 3337(a), (b), and (c), and the time limitations prescribed in CCR, Title 15, Section 3338.
(Reference: CCR, Title 15, Section 3337 (d).)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation that the hearing time frames were appropriate based on the inmate's request.

- e. Decision to retain in Ad Seg or release to unit/facility.

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Each (100 percent) of the 30 records reviewed contained documentation that a decision was made to retain or release the inmate based on the administrative review.

6. **Classification Hearing.** An inmate's placement in temporary segregation shall be reviewed by the ICC within 10 days of receipt in the unit.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3335(c), 3338(a), (b), (c), (d), (g), (h), (i), 3375, and 3339 (b) (2); and DOM, Sections 52080.27.4 and 62010.9.1.)

Findings

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 26 (87 percent) contained documentation of an ICC review within 10 days of an inmate's placement in Ad Seg. The 4 remaining records documented a late ICC review (1 to 5 days).

- a. The determinations arrived at in the classification hearing will be documented on the CDC 128-G. Such documentation will include an explanation of the reason and the information and evidence relied upon for the action taken. The inmate will also be given copies of all completed forms and of all other documents relied upon in the hearing, except those containing confidential information.
(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3338(i), 3375(g), and (h); and DOM, Sections 52080.27.4 and 62010.9.1.)

Findings

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Of the 23 ratable records, 19 (83 percent) contained documentation of the determination arrived at during the ICC on the CDC 128-G. The 4 remaining records did not address the due process violation of a late ICC on the CDC 128-G.

- b. Was the hearing date recorded on the CDC 128-G?
(Reference: CCR, Title 15, Section 3375(g)(9); and DOM, Section 62010.9.1.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 23 ratable records contained properly documented hearing dates on the CDC 128-G.

- c. Was the inmate's presence at the hearing documented on the CDC 128-G?
(Reference: CCR, Title 15, Sections 3338(c) and 3375(g)(5); and DOM, Section 52080.27.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 23 ratable records contained documentation to verify the inmate's presence or absence at the hearing on the CDC 128-G.

- d. Were the Hearing Officers identified on the CDC 128-G?
(Reference: CCR, Title 15, Sections 3375(g)(6-8); and DOM, Section 62010.9.1.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 23 ratable records identified the Hearing Officers on the CDC 128-G.

- e. If appropriate, were the SA and the IE identified in the CDC 128-G?
(Reference: CCR, Title 15, Section 3338(c)(i); and DOM, Section 62010.9.1.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 29 were not ratable as the need for a SA or IE was properly documented on the CDC 114-D or the CDC 128-G had not yet been typed. The 1 (100 percent) ratable record documented the need for a SA/IE on the CDC 128-G when this information was not otherwise properly documented on the CDC 114-D.

- f. If appropriate, was the witness portion addressed in the CDC 128-G?
(Reference: CCR, Title 15, Sections 3338(h) and (i); and DOM, Section 52080.27.3-4.)

Findings

PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 27 were not ratable as the need for witnesses was properly documented on the CDC 114-D or the CDC 128-G had not yet been typed. Of the 3 remaining records, 2 (67 percent) properly documented the need for witnesses as required. The 1 remaining CDC 128-G did not contain this information.

- g. The completed CDC 128-G contains the yard group designation arrived at during the classification hearing.
(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 98/27.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 23 ratable records contained documentation of the inmate's yard group designation on the CDC 128-G.

- h. The completed CDC 128-G documents the inmate's current cell status (single or double celled).
(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 97/27.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 23 ratable records contained documentation of the inmate's current cell status on the CDC 128-G.

- i. The completed CDC 128-G documents the inmate's participation during committee and their agreement or disagreement with the ICC's action.
(Reference: CCR, Title 15, Sections 3338(i) and 3375(f)(2-6); and DOM, Section 52080.27.4.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 7 were not ratable as the ICC had been held so recently the CDC 128-G had not yet been typed. Each (100 percent) of the 23 ratable records contained documentation of the inmate's participation with the ICC on the CDC 128-G.

7. **Classification Review.** Instead of the ICC reviewing each inmate's case every 30 days, inmates in Ad Seg for nondisciplinary reasons shall require routine review no more frequently than every 90 days, or when scheduled by staff for specific action. Inmates segregated for disciplinary reasons shall be reviewed by ICC at least every 180 days, or when scheduled by staff for specific action.
(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, Ad Seg Classification Review.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 20 were not ratable as the inmate had not been on Ad Seg status long enough to require a follow-up review. Each (100 percent) of the 10 ratable records contained documentation of an ICC review as appropriate.

8. **The CSR Review.** All inmates retained in Ad Seg at their ten-day Ad Seg hearing shall be referred to the CSR for retention authorization at that initial review.
(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, Ad Seg Classification Review.)

Findings

COMPLIANCE

The CPRB examined 30 central files of inmates housed in KVSP's Ad Seg units.

Of the 30 records reviewed, 29 (97 percent) contained documentation that indicated the case had been referred to a CSR for review as appropriate. The 1 remaining record did not contain this information.

III

ADMINISTRATION

1. **Training.** All staff working in specialized units are to receive specialized training centering around that unit's operation and program.
(Authority cited: PC, Sections 830.5, 832, 5054, 5058, 13600, and 13601. Reference: DOM, Section 32010.14.5.)

Findings

PARTIAL COMPLIANCE

The CPRB interviewed In-Service Training staff and examined the training records of all Ad Seg staff assigned to the units for one year or more.

Documentation provided indicated that 88 custody staff have been assigned to the Ad Seg units for one year or more. These 88 staff members are each required to have received 11 specialized training classes. Of the 968 required specialized training classes, 842 (87 percent) have been taken.

2. **The ICC.** The ICC shall consist of:
 - Warden or Regional Parole Administrator, or Deputy Warden or Assistant Regional Parole Administrator (chairperson);

- Correctional Administrator or Parole Administrator III (alternate Chairperson);
- Psychiatrist or Physician;
- Facility Captain;
- Correctional Captain;
- CC III or Parole Agent III, or CC II or Parole Agent II (Committee Recorder);
- Assignment Lieutenant;
- Educational or Vocational Program Representative; and
- Other Staff as required.

(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3376(c)(2); and DOM, Section 62010.8.2.)

Findings

COMPLIANCE

The CPRB examined 30 central files and reviewed CDC 128-Gs.

The review revealed that the composition of the ICC was in compliance with this standard.

3. **Record of Disciplinary.** All institutions will maintain a Register of Institution Violations. A Register of Institution Violations is a compilation of one completed copy of each rule violation report issued at a facility, maintained in chronological order.
(Authority cited: PC, Sections 2081, 5054, and 5058. Reference: CCR, Title 15, Sections 3326(a)(1-2); and DOM, Section 52080.15.1.)

Findings

COMPLIANCE

The CPRB interviewed appropriate staff and examined the Disciplinary Log and Register of Institutional Violations.

The review revealed that the Institution maintains a Register of Institutional Violations which meets the basic requirements of DOM. A tracking system is utilized to follow each disciplinary log number and adjudicated Rules Violation Report.

4. **Post Order-Firearms.** Detailed instructions regarding the use of firearms shall be contained in the post orders of armed posts and shall be issued to staff that may regularly be required to use firearms in the course of their duties.
(Authority cited: PC, Sections 830, 832.5, 5054, and 5058. Reference: DOM, Section 55050.4.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that there are 14 identified gun posts that require use of force policies be addressed as part of the post orders. Each (100 percent) of the 14 armed posts directed the staff member to read, understand, and become familiar with the departmental Use of Force Policy, CCR, Section 3268.

5. **Post Order-Job Site.** A copy of the post order shall be provided for every post and a copy shall be physically located at each job site.
(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that a current copy of the post order is provided at the job-site for 67 (93 percent) of the 72 Ad Seg posts. Post order Nos. 221970, 321961, 161760, 221761, and 321762 were missing. It should be noted that three of these post orders were for gun posts.

6. Employees under post orders are required to sign and date the CDC 1860, verifying their understanding of the duties and responsibilities of the post. This shall be completed when the employee is assigned to the post, when the post order has been revised, or upon returning from an extended absence.

Findings

PARTIAL COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed there are 124 identified staff who are assigned to 72 Ad Seg posts. Of the 157 required signatures, 102 (65 percent) were present acknowledging the understanding of the post orders.

- a. **Post Order-Staff.** Supervisors, by authority of the Correctional Captain or area Manager, shall ensure that employees read and understand their post orders upon assuming their post.
(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.1.)

Findings

PARTIAL COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the Ad Seg units read and understand their post order upon assuming their post.

- b. At a minimum of once each month, supervisors shall inspect the post orders and sign the CDC 1860. Any torn or missing pages noted shall be replaced as soon as practical.

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that the custodial supervisors assigned to the Ad Seg units inspect the CDC 1860 on a monthly basis.

- c. A CDC 1860 shall be attached to each post order and shall be utilized to verify that the assigned staff member has read and understood the post orders for their post. The CDC 1860s shall be kept for a period of one year from the date of last entry unless deemed evidentiary (then retained until no longer needed).
(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.2.)

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that KVSP utilizes a CDC 1860 to allow the staff member to verify, by signature, that they have read and understand the order for the post and this is then countersigned by the supervisor. Each (100 percent) of the 67 post orders that were on post contained the current acknowledgment sheet.

7. **Protective Vests.** All CDCR employees, regardless of personnel classification, entering a SHU, Special Management Program, Ad Seg, Temporary Detention Unit, Condemned Housing Unit, Psychiatric Services Unit, or Special Behavioral Treatment Program, shall wear a Stab Resistant Vest when the employee is:
- In direct contact with inmates/wards/patients within the aforementioned units (unrestrained or restrained).
 - Escorting inmates/wards/patients housed within the aforementioned units anywhere on institution grounds.
 - On the aforementioned unit tiers.
- (Authority cited: DOM, Section 33020.16.2.)**

Findings

COMPLIANCE

The CPRB toured KVSP's Ad Seg units, examined unit documentation, and interviewed unit staff.

The review revealed that all required staff wear a protective vest while in the Ad Seg units.

Review of Administrative Segregation and Due Process

Kern Valley State Prison

GLOSSARY

AB	Administrative Bulletin
Ad Seg	Administrative Segregation
AOD	Administrative Officer of the Day
AW	Associate Warden
CC	Correctional Counselor
CCR	California Code of Regulations
CDC 114	Isolation Log Book
CDC 114-A	Isolation/Segregation Profile
CDC 114-A1	Inmate Segregation Profile
CDC 114-D	Order for Placement/Retention in Administrative Segregation
CDC 128-G	Classification Chrono Form
CDC 844	In-Service Training Sign-In Sheet
CDC 1030	Confidential Information Disclosure form
CDC 1860	Post Order Acknowledgment Form
CDCR	California Department of Corrections and Rehabilitation
CPRB	Compliance/Peer Review Branch
CSR	Classification Staff Representative
DOM	Department Operations Manual
DS 5003	Fire Drill Report
IB	Informational Bulletin
ICC	Institution Classification Committee
IE	Investigative Employee
IST	In-Service Training
KVSP	Kern Valley State Prison
OC	Oleoresin Capsicum
PC	California Penal Code
SA	Staff Assistant
SHU	Security Housing Unit

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS AND RECOMMENDATIONS

BUSINESS SERVICES

KERN VALLEY STATE PRISON

DECEMBER 1 THROUGH DECEMBER 11, 2008

PRELIMINARY

CONDUCTED BY
THE AUDITS BRANCH



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**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

KERN VALLEY STATE PRISON

INTRODUCTION

The California Department of Corrections and Rehabilitation's (CDCR), Office of Audits and Compliance (OAC), Audits Branch, conducted an audit of Business Services at Kern Valley State Prison (KVSP). The purpose of the audit was to analyze and evaluate the level of compliance with State, federal, and departmental policies, procedures, rules, regulations, operational objectives, and guidelines. The areas of Classification and Pay and Bio-Hazardous Waste were not audited. The following areas were audited:

- Personnel Transactions;
- Delegated Testing;
- Food Services;
- Payroll/Accounting;
- Position Control;
- Procurement;
- Materials Management (i.e., Warehouses and Property);
- Plant Operations;
- Inmate Trust Accounting;
- Environmental Health and Safety;
- Occupational Health and Safety; and
- Follow-up to the April 2008 Food Facility Inspection that was performed by the Office of Risk Management (ORM).

The fieldwork was performed during the period of December 1 through December 11, 2008. The exit conference was held on December 11, 2008.

René Francis, Certified Government Financial Manager, supervised the audit. Management Auditors Annette Sierra, Deborah Brannon, Michael Robinson, Naomi Banks, and Saihra Posas conducted the audit. In addition, Larry Keenan, Correctional Plant Supervisor, North Kern State Prison, Lucy Sojka, Assistant Correctional Food Manager, Pelican Bay State Prison, and Joe Wenzel Hazardous Material Specialist, California State Prison, Corcoran provided subject matter expertise. Patricia Weatherspoon, Senior Management Auditor provided second line supervision and review. Richard C. Krupp, Assistant Secretary of the OAC, provided executive management oversight.

The audit consisted of an entrance conference, review of prior reports, test of transactions, interviews, observations, periodic management briefings, an exit conference, and issuance of the preliminary audit report.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

KERN VALLEY STATE PRISON

AUDIT SCOPE

The scope of the audit encompasses the examination and evaluation of the adequacy and effectiveness of KVSP's system of management control and compliance to applicable policies, procedures, rules, and regulations. The audit period may include prior fiscal years if deemed necessary. The control objectives include, but are not limited to the following:

- State assets are safeguarded from unauthorized use or disposition;
- Transactions are executed in accordance to management's authorizations;
- Transactions are executed in accordance with applicable rules and regulations;
- Transactions are recorded correctly to permit the preparation of financial and management reports; and
- Programs are working efficiently and effectively.

In order to determine the adequacy of the control systems and level of compliance with State, federal, and departmental fiscal procedures, the audit team performed the following audit procedures:

- Examined evidence on a test basis supporting management's assertions;
- Performed detailed analyses of documentation and transactions;
- Interviewed Facility staff;
- Made inspections and observations;
- Performed group discussions of the overall impact of deficiencies; and
- Discussed deficiencies with supervisors and management throughout the audit process.

SYMPTOMS OF CONTROL DEFICIENCIES

Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system. These symptoms may apply to the organization as a whole or to individual units or activities. Department heads and managers should identify and make the necessary corrections when warned by any of the danger signals listed below:

- Policy and procedural or operational manuals are either not currently maintained or are nonexistent;
- Lines of organizational authority and responsibility are not clearly articulated or are nonexistent;
- Financial and operational reporting is not timely and is not used as an effective management tool;
- Line supervisors ignore or do not adequately monitor control compliance;
- No procedures are established to assure that controls in all areas of operation are evaluated on a reasonable and timely basis;
- Internal control weaknesses detected are not acted upon in a timely fashion; and
- Controls and/or control evaluations bear little relationship to organizational exposure to risk of loss or resources.

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AUDITS BRANCH**

KERN VALLEY STATE PRISON

CORRECTIVE ACTION PLAN

KVSPs corrective action plan (CAP) is due within 30 days of receipt of the preliminary audit report. See Attachment A for a sample of the format.

The CAP is designed to document the institution's plan to fully resolve the audit findings. It includes a brief description of the audit finding, the classification of the personnel directly responsible for resolving the finding(s), their telephone number and/or extension, a brief description of the proposed action and the anticipated date of completion.

Please e-mail your completed CAP to Alberto.Caton@cdcr.ca.gov and Rose.Mitjans@cdcr.ca.gov. Send the original to Alberto Caton, OAC, P.O. Box 942883, Sacramento, CA 95811-7243.

If you need additional time to prepare your CAP, please contact Alberto Caton, Correctional Administrator at (916) 255-2717.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

KERN VALLEY STATE PRISON

EXECUTIVE SUMMARY

The Audits Branch conducted an audit of the Business Services at KVSP during the period of December 1 through December 11, 2008. The purpose of the audit was to determine the level of compliance with State, federal, and departmental rules, regulations, policies, and procedures. The areas of Classification and Pay and Bio-Hazardous Waste were not audited.

An exit conference was held on December 11, 2008, with the Chief Deputy Warden, and Business Services. The Audits Branch requested that KVSP provide a CAP within 30 days after receipt of the preliminary audit report.

Areas audited:

- Personnel Transactions;
- Delegated Testing;
- Food Services;
- Payroll/Accounting;
- Position Control;
- Procurement;
- Materials Management (i.e., Warehouses and Property);
- Plant Operations;
- Inmate Trust Accounting;
- Environmental Health and Safety;
- Occupational Health and Safety; and
- Follow-up to the April 2008 Food Facility Inspection that was performed by the ORM.

Thirty-four findings are identified in the preliminary audit report, categorized under the following topics:

Category	Number of Findings	Page Number
Administrative Concerns	5	1
Health and Safety	6	3
Internal Control	6	7
Late Detection and Additional Workload	15	11
Policies and Procedures	1	20
Training	1	21
Total	34	

The executive summary provides the category, a brief description of the finding, criteria, and impact.

It should be noted that turnover in the area of Business Services over the past 12 months is as follows: Personnel (53 percent), Food Services (31 percent), Accounting (27 percent), Procurement (17 percent), and Plant Operations (9 percent).

I. ADMINISTRATIVE CONCERNS

A. Personnel Transactions

Individual Development Plans (IDP) and Probation Reports are not prepared in a timely manner. As of December 3, 2008, there are 735 reports outstanding. Personnel Transaction Manual (PTM).

Impact: This condition results in employees unaware of their job performance and work expectations.

Organization charts for Business Services were not current. For example, two employees who transferred prior to August 2008, the approval date of the organization chart, are still reflected on the chart. Also, the organization chart maintained in the Plant Operations Procedure Manual is not the official organization chart. CDCR Memorandum.

Impact: This issue makes it difficult to reconcile the position number that employees are paid out of and creates additional workload.

Duty statements were missing for five of the 15 employees sampled in Plant Operations. Also, the duty statement for the Property Controller II was inaccurate (i.e., incorrect reporting structure). State Administrative Manual (SAM).

Impact: This issue results in difficulty determining the duties and responsibilities of staff.

B. Smoking Policy

Staff were not complying with the smoking policy. The Audits Branch noted smoking of tobacco products in the Main Kitchen refrigerator that stores milk. Administrative Bulletin (AB).

Impact: This condition results in possible food contamination and an increased threat to life, health and safety. In addition, this condition may increase the institutions liability.

C. Food Services

There are 12 ovens, six steamers and 75 fans that were purchased last year but have not been installed as of December 2008. Compounding this issue are the amounts of inoperable equipment. Department Operations Manual (DOM) and Health and Safety Code (H&SC)

Impact: These issues could result in difficulty maintaining adequate temperatures; ensuring food is processed in an efficient manner, possible food contamination, food borne illness, and workplace hazards.

II. HEALTH AND SAFETY

A. Occupational Health and Safety

Safety meetings (i.e., tailgates) are not conducted for each maintenance section at least every ten days and written minutes are not taken. The Audits Branch tested ten trade shops of which 50 percent did not consistently conduct and document safety meetings. California Code of Regulations (CCR).

Impact: This condition suggests that safety issues may not be emphasized and documented.

Communicating work place hazards is not performed in accordance to the KVSP-Injury and Illness Prevention Plan (IIPP). For example, employees are not supplied with current hazard information pertinent to their work assignments. Also, the Codes of Safe Practices and Hazard Evaluations maintained at Plant Operations have not been updated since 1996 and 2002. DOM and KVSP's IIPP.

Impact: This issue may result in duties not performed in a safe and healthy manner.

B. Environmental Health and Safety

The Audits Branch noted that staff and inmates are not notified prior to pesticides/insecticide applications. Bargaining Unit 1 Contract.

Impact: This condition may expose staff and inmates to potentially harmful chemicals.

C. Food Services

Thirteen of the 19 satellite kitchens were inspected. In general, deficiencies related to drying of serving trays, hand washing signs, soap/paper towels, floors and drains, walk-in refrigerators, steam lines, hoods/screens, and fly strips. H&SC.

Impact: These issues result in unsanitary conditions, possible food contamination, food borne illness, increased risk of vermin, potential for bacteria growth, and workplace hazards.

Refrigerators and freezers located in the Central and Satellite Kitchens are deteriorating. For example, gaskets are worn, the condenser pipe is leaking, door frames are missing sections, and do not align. Additionally, the insulation is exposed, doors cannot be locked, lights are inoperable, and the metal covers for the hinges on the reach-ins have been removed. This was a finding by the ORM during their April 2008 Food Facility Inspection. H&SC.

Impact: These issues result in taxing the cooling unit and shortening the life expectancy of the equipment, possible food contamination, increased risk of vermin, potential for bacteria growth, and workplace hazards.

The short wall by the ice machine in the Satellite Kitchen B-4 is a hazard to the workplace. The rounded portion of the corner is broken off. This results in missing tile pieces and exposes concrete. H&SC.

Impact: This issue could result in injury to employees.

III. INTERNAL CONTROL

A. Non-Drug Medical Supplies

Separation of duties is inadequate. The Materials and Stores Supervisor (M&SS) I, Correctional Facility (CF) has significant control over the inventory. They prepare the Form 5, receive and maintain inventory, processes requisitions, and are responsible for reconciling inventory. Additionally, stock records are not maintained, physical inventories and reconciliations are not performed, adjustment documents are not prepared for management review, spot checks are not conducted, and access to inventory is not restricted. The Correctional Health Services Administrator (CHSA) does not restrict access to the keys. SAM and DOM.

Impact: These conditions may result in late detection of errors, irregularities, theft, and/or misappropriation.

B. Maintenance Warehouse

Separation of duties is inadequate. The M&SS I, CF and M&SS II, CF have significant control over the inventory. They prepare the Form 5, receive and maintain inventory, processes requisitions, and perform physical counts of inventory. Additionally, the physical inventory is not current or accurate. A spot check was conducted and five of the ten items tested did not reconcile to the State Logistics and Materials Management (SLAMM) inventory report. Inventory adjustment sheets are not forwarded to the Business Manager for review and approval prior to making adjustments and access is not restricted, when eight employees have keys to the warehouse. SAM and DOM.

Impact: These conditions may result in late detection of errors, irregularities, theft, and/or misappropriation.

Returned Stock Reports, Std. 108, are not processed appropriately. Returned goods are documented in a log book but the actual Std. 108 is not prepared and forwarded to the Accounting Office. SAM.

Impact: This condition may result in overpayment.

C. Inmate Trust Accounting

The inmate organization entitled, Education, Division, and Goals to Endeavor (EDGE), has organized three fund-raisers within a 12 month period of which 2 were not authorized by the Warden. SAM and KVSP's EDGE Bylaws.

Impact: This condition results in unauthorized fund raisers.

D. Payroll/Personnel

Separation of duties is inadequate over the distribution of payroll when 7 of the 15 paymasters are also unit timekeepers who distribute salary warrants. SAM.

Impact: This issue could result in late detection of errors and/or irregularities.

There is a case of nepotism in the Personnel Office when a mother and daughter report to the same supervisor. DOM.

Impact: The issue could effect or adversely influence safety, security, morale, fair, and impartial supervision.

IV. LATE DETECTION AND ADDITIONAL WORKLOAD

A. Personnel

As of December 2008, there are 21 suspended payments that have not been cleared within 90 days and one dates back to April 2006. Payroll Procedure Manual (PPM).

Impact: This condition could result in difficulty resolving outstanding payments.

The Time and Attendance Report (Std. 672) is completed in pencil instead of ink. This occurred in five of the nine Std. 672s reviewed. PPM.

Impact: If this attendance practice continues, it could result in manipulation of time paid and late detection of inappropriate use of leave.

Currently, there are seven unauthorized permanent full time positions appointed into the 918 blanket. Two of the positions date back to February 2008 and are in Plant Operations. SAM.

Impact: This issue resulted in the over expending of KVSP's budget authority by \$238,670 during the 2008 calendar year.

The hiring package for the Correctional Administrator interviews conducted January 2 through January 4, 2008, did not include the interview questions for the candidate hired. In addition, the hiring package for the Personnel Supervisor listed on the Change in Established Positions (Std. 607) log for September 1, 2005, could not be located. CDCR Memorandum, Hiring Process, dated April 21, 2003

Impact: This issue could result in difficulty providing documents for responses to inquiries and grievances.

B. Plant Operations

There are several deficiencies related to managing emergency generators. For example:

- There are no local operating procedures.
- Testing dates are not logged.
- Log books do not identify the asset number, start time, end time and are disorganized.

- Fuel purchased, delivered and used is not adequately documented. Institutions Maintenance Unit (IMU) and DOM.

Impact: These issues make it difficult to determine and validate that emergency generators are tested timely and properly maintained.

The following deficiencies are noted regarding the cross-connection program (i.e., backflow):

- The master list does not reconcile to asset history reports.
- It could not be determined whether backflow devices are tested annually and those that failed were tested and subsequently repaired or surveyed.
- There is no published cross-connection schedule for 2008. California Plumbing Code (CPC), Standard Automated Preventive Maintenance System (SAPMS), and Department of Health Services (DHS)

Impact: These issues result in difficulty determining whether backflow device tests have been performed.

The preventive maintenance (PM) of the heating, ventilation, and air conditioning (HVAC) is inadequate. Departmental Plant Operations Maintenance Procedures Manual (DPOMPM) and SAPMS

Impact: This condition may render the PM program ineffective, decrease efficiency, increase downtime and may result in additional costs.

The methods of a PM program are not being followed. For example:

- PM procedures have not been approved by the Associate Warden, Business Services and Warden.
- Asset history reports are not requested or reviewed by supervisors.
- A PM program is not adhered to in Food Services for 83 percent of the equipment.
- Equipment/assets are not always clearly identified with the standard equipment code. One hundred percent of assets tested in Food Services are not tagged. CCR, SAPMS, DPOPM, and H&SC.

Impact: These conditions may render the PM program ineffective, decrease efficiency, increase downtime and result in additional costs.

The Plant Operations Maintenance Report (POM) does not accurately reflect Plant Operations activities. For example, hours and staff are understated, and priorities are inaccurate. DOM and SAPMS.

Impact: These issues result in inaccurate information provided to management for decision making.

The Inmate Work Supervisors Time Log (CDC 1697) is not properly maintained. For example:

- Reasons for using Exceptional Time are not documented.
- Xeroxed copies are used of the CDC 1697.
- There are no Inmate Work Training Incentive Program (IWTIP) guidelines. CCR.

Impact: These issues result in inaccurate documentation of inmate work time.

C. Inmate Trust Accounting

The Parole Release Fund Reconciliations are not reviewed on a consistent basis. Seventy percent of the reconciliations reviewed are missing the reviewer's signature and date. SAM.

Impact: This condition may result in late detection of errors and irregularities.

There are 8 undelivered salary warrants maintained in the trust office that have not been delivered and/or returned to the State Treasury's office within 90 days. SAM.

Impact: This condition could result in loss of interest income and possibility of misappropriation of the unclaimed salary warrants.

Cancelled, cleared, and voided checks are not systematically maintained and organized. As a result, several voided and cancelled checks could not be located. SAM.

Impact: This issue makes it difficult to audit checks and may result in late detection or error, irregularities, theft, and/or misappropriation.

D. Property

The Property Control System (PCS) report does not always reflect the cost of property and/or the Purchase order number. For example, the PCS report for the armory has 184 entries, of which 48 (26 percent) does not have a cost associated with the inventory. DOM.

Impact: This condition may result in understating the cost of property and may lead to poor inventory management.

E. Food Services

CDC 1697s have several deficiencies. For example, duty statements are not signed by inmates, three versions of the form are used, there are no transfer-in dates and the Daily Movement Sheet (DMS) numbers are not recorded. CCR.

Impact: This issue could result in overpayment of inmate time worked and inaccurate information reported regarding inmates time.

V. POLICIES AND PROCEDURES

There is no institutional approved operating procedure for the Pest Control Technician (PCT). CCR.

Impact: Employees may not be aware of current rules, regulations, and processes related to pest control activities.

VI. TRAINING

Attendance in general and On the Job (OJT) training is inadequate based on In-Service Training (IST) documentation. There are 61 rank and file employees and 9 supervisory staff in Plant Operations. Based on the review of 6 training courses, attendance to training classes ranges from 0 percent to 74 percent. DOM.

Impact: This issue may result in employees not being aware of current policies, procedures, and practices.

FINDINGS AND RECOMMENDATIONS

It should be noted that turnover in the area of Business Services over the past 12 months is as follows: Personnel (53 percent), Food Services (31 percent), Accounting (27 percent), Procurement (17 percent), and Plant Operations (9 percent).

I. ADMINISTRATIVE CONCERNS

A. Personnel Transactions

1. Individual Development Plans/Probation Reports

IDPs and Probation Reports are not prepared in a timely manner. As of December 3, 2008, there are 735 reports outstanding.

This condition results in employees being unaware of their job performance and work expectations.

The PTM, Section Agency Responsibility, 900.1, states in part: "... each State agency is responsible for the administration of the performance appraisal program for permanent and probation employee. The success of programs will depend largely on the effectiveness of training provided in the agency for employees, supervisors, and management at all levels. Each agency shall adopt a system of performance appraisals in accordance with the rules of the State Personnel Board."

Recommendation

Establish a procedure to ensure that IDPs and performance reports are prepared in a timely manner. In addition, the personnel office should develop a process which notifies supervisors and managers of the due days for the reports.

2. Organization Charts

Organization charts for Business Services were not current. For example, two employees who transferred prior to August 2008, the approval date of the organization chart, are still reflected on the chart. Also, the organization chart maintained in the Plant Operations Procedure Manual is not the official organization chart.

This makes it difficult to reconcile the position number that employees are paid out of and creates additional workload.

CDCR Memorandum, Subject: CDCR Organization Charts, dated December 13, 2007, states in part: "In accordance with the Delegation Program Agreement which exists between the CDCR and DPA...As a condition of the agreement, CDCR is required to maintain up-to-date staffing records and information, including organization charts...."

Recommendation

Ensure that organization charts accurately reflect the organizational structure and correct classification, position number and name of current employee.

3. Duty Statements

Duty statements were missing for five of the 15 employees sampled in Plant Operations. Also, the duty statement for the Property Controller II was inaccurate (i.e., incorrect reporting structure).

This issue results in difficulty determining the duties and responsibilities of staff.

SAM, 20050, Internal Control, states in part: "Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system . . . 2. Line of organizational authority and responsibility are not clearly articulated or are nonexistent. . . ."

Recommendation

Reconcile duty statements to classifications and review them for accuracy.

B. Smoking Policy

Employees are not complying with the smoking policy. The Audits Branch noted smoking of tobacco products in the Main Kitchen refrigerator that stores milk.

This condition results in an increased threat to life, health, and safety. In addition, this condition may increase the institutions liability.

AB 846, states in part: "Existing state law prohibits any state employee or member of the public from smoking a tobacco product inside a state-owned or state occupied building, as defined, or within 5 feet of the main exit or entrance of these buildings or in a passenger vehicle owned by the state. This bill would instead prohibit smoking inside a public building, as defined and within 20 feet of a main exit, entrance or operable window of a public building. It would also provide that these provisions would preempt the authority of any county, city, city and county, California Community College campus, or campus of the California State University, or campus of the University of California to adopt and enforce additional smoking and tobacco control ordinances, regulations, or policies that are more restrictive than the standards required by this bill. This bill would also make other technical, non-substantive, and conforming changes to these provisions."

Recommendation

Comply with AB 846.

C. Food Services

1. Equipment (Ovens and Steamers for Satellite Kitchens)

There are 12 ovens, 6 steamers and 75 fans that were purchased last year but have not been installed as of December 2008. Compounding this issue are the amounts of inoperable equipment.

These issues could result in difficulty maintaining adequate temperatures; ensuring food is processed in an efficient manner, possible food contamination, food borne illness, and workplace hazards.

DOM, Section 54080.1, states in part: "Sanitation, safety, and food handling standards and practices shall be established and maintained in keeping with applicable requirements established by the Industrial Safety Standards (California Code of Regulations, Title 8) and the California Health and Safety Code (H&SC)."

H&SC, Section 114175, states, "Equipment and utensils shall be kept clean, fully operative, and in good repair."

Recommendation

Improvements are needed on the operation and maintenance of equipment located in the satellite kitchens, including but not limited to scullery machines, steam tables, retherm ovens, and ice machines.

Comply with the overall standards established by the H&SC, Part 7, California Retail Food Code, Sections 113700 through 114437, for the installation of the ovens, steamers, and fans for the Food Services Department, as well as for other broken/inoperable equipment.

II. HEALTH AND SAFETY

A. Occupational Health and Safety

1. Safety Meetings

Safety meetings (i.e., tailgates) are not conducted for each maintenance section at least every 10 days and written minutes taken. The Audits Branch tested 10 trade shops of which 50 percent did not consistently conduct and document safety meetings.

This condition suggests that safety issues may not be emphasized and documented. Also, this issue suggests that Plant Operations is not maintaining an effective IIPP.

CCR, Title 8, Article 3, Section 8406(e), IIPP, states in part: "Supervisory personnel shall conduct "toolbox" or "tailgate" safety meetings with their crews at least weekly on the job to emphasize safety. A record of such meetings shall be kept, stating the meeting date, time, place, supervisory personnel present subjects discussed and corrective action taken, if any, and maintained for inspection."

Recommendation

Comply with the CCR, Title 8 in regards to safety meetings.

2. IIPP

Communicating work place hazards is not performed in accordance to the KVSP-IIPP. For example, employees are not supplied with current hazard information pertinent to their work assignments. Also, the codes of Safe Practices and Hazard Evaluations maintained at Plant Operations have not been updated since 1996 and 2002.

This issue may result in duties not performed in a safe and healthy manner.

DOM, Section 31020.3, Objectives, states in part: "All systems shall meet or exceed the minimum safety and health standards of the General Industry Safety Orders (GISO), CCR (8); Manual of Standards for Adult Correctional Institutions; National Fire Protection Association (NFPA) Life Safety Codes; H&SC; and all other applicable federal, state, and local laws, ordinances, and codes regarding occupational safety, environmental health, and fire prevention and control."

KVSP's IIPP, states in part: "Recording keeping requirements of the CCR, Title 8, Section 3203 (D) will be adhered to, including: Maintenance of all written documents for five years. Other forms of employer-to- employee communications on safety topics include specific posters letters meetings etc... Local procedures include but are limited to Code of Safe Practices and other job-specific hazards...."

Recommendation

Comply with the DOM, and the KVSP's IIPP program.

B. Environmental Health and Safety

The Audits Branch noted that staff and inmates are not notified prior to pesticides/insecticide applications.

This condition may expose staff and inmates to potentially harmful chemicals.

BU 1 Contract, states in part: "Whenever a department utilizes a pest control chemical in a state owned or managed building/grounds, the department will

provide at least forty-eight hours notice prior to application of the chemical, unless an infestation occurs which requires immediate action. Notices will be posted in the lobby building and will be disseminated to building tenant contacts.”

Recommendation

Notify staff and inmates prior to applying pesticides in accordance with the provisions established by the Bargaining Unit 1 Contract.

C. Food Services

1. Sanitation

The Audits Branch performed a health, safety, and sanitation inspection of the Central Kitchen and 13 of the 19 Satellite Kitchens. See Attachment B for deficiencies by locations.

These issues result in unsanitary conditions, possible food contamination, food borne illness, increased risk of vermin, potential for bacteria growth, workplace hazards causing injury to staff and inmates, and unacceptable risks.

The H&SC, Section 113953.2, states: “...a sign or poster that notifies food employees to wash their hands shall be posted at all hand washing lavatories used by food employees, and shall be clearly visible to food employees....”

The H&SC, Section 113953.2, states: “A hand washing facility shall be provided with the following in dispensers at, or adjacent to, each hand washing facility: (a) Hand washing cleanser. (b) Sanitary single use towels or a heated-air hand drying device.”

The H&SC, Section 114105, states: “After cleaning and sanitizing, equipment and utensils shall be air dried or used after adequate draining before contact with food and shall not be cloth dried....”

The H&SC, Section 114130(a), states: “Equipment and utensils shall be designed and constructed to be durable and to retain their characteristic qualities under normal use conditions....”

The H&SC, Section 114175, states: “Equipment and utensils shall be kept clean, fully operative, and in good repair.”

The H&SC, Section 114259, states: “A food facility shall at all times be constructed, equipped, maintained, and operated as to prevent the entrance and harborage of animals, birds, and vermin, including, but not limited to, rodents and insects.”

The H&SC, Section 113996, states in part: “Except during preparation, cooking, cooling, transportation to or from a retail food facility for a period of less than

30 minutes, or when time is used as the public health control as specified under Section 114000, or as otherwise provided in this section, potentially hazardous food shall be maintained at or above 135°F, or at or below 41°F....”

Recommendation

Perform periodic inspections of food services, document deficiencies and prepare a strategy for resolution which conforms with the overall standards established by the H&SC, Part 7, California Retail Food Code, Sections 113700 through 114437.

2. Refrigerators and Freezers

Refrigerators and freezers located in the Central and Satellite Kitchens are deteriorating. For example, gaskets are worn, the condenser pipe is leaking, door frames are missing sections, and do not align. Additionally, the insulation is exposed, doors cannot be locked, lights are inoperable, and the metal covers for the hinges have been removed. See attachment C for findings by location.

These issues result in taxing the cooling unit and shortening the life expectancy of the equipment, possible food contamination, increased risk of vermin, potential for bacteria growth, and workplace hazards.

The H&SC, Section 114130(a), states: “Equipment and utensils shall be designed and constructed to be durable and to retain their characteristic qualities under normal use conditions....”

The H&SC, Section 114175, states: “Equipment and utensils shall be kept clean, fully operative, and in good repair.”

The H&SC, Section 114259, states: “A food facility shall at all times be constructed, equipped, maintained, and operated as to prevent the entrance and harborage of animals, birds, and vermin, including, but not limited to, rodents and insects.”

Recommendation

Perform periodic inspections of food services, document deficiencies and prepare a strategy for resolution which conforms with the overall standards established by the H&SC, Part 7, California Retail Food Code, Sections 113700 through 114437.

3. Satellite Kitchen, B-4

The short wall by the ice machine in the Satellite Kitchen B-4 is a hazard to the workplace. The rounded portion of the corner is broken off. This results in missing tile pieces and exposes concrete.

This issue could result in injury to employees.

The H&SC, Section 114271(a), states: "Except as provided in subdivision (b), the walls and ceilings of all rooms shall be durable, smooth, nonabsorbent, and easily cleanable surface...."

Recommendation

Perform periodic inspections of food services, document deficiencies and prepare a strategy for resolution which conforms with the overall standards established by the H&SC, Part 7, California Retail Food Code, Sections 113700 through 114437.

III. INTERNAL CONTROL

A. Non-Drug Medical Supplies

1. Separation of Duties, Inventory and Access

Separation of duties is inadequate. The M&SS I, CF has significant control over the inventory. They prepare the Form 5, receive and maintains inventory, processes requisitions and is responsible for reconciling inventory. Additionally, stock records are not maintained, physical inventories and reconciliations are not performed, adjustment documents are not prepared for management review, spot checks are not conducted and access to inventory is not restricted. The CHSA does not restrict access to the keys.

This condition may result in late detection of errors, irregularities, theft, and/or misappropriation.

SAM, Section 20050, states in part: "...elements of a satisfactory system of internal accounting and administrative controls, shall include, but are not limited to: A plan of organization that provides segregation of duties appropriate for proper safeguarding of state assets...."

DOM, Sections 22030.10.1 and 22030.11.8, Stock Records and Physical Inventory, states in part: "Stock records shall be maintained by using a manual or computerized inventory control system...The stock record, which serves as a joint purchasing/financial/operational record, shall be kept current and accurate at all times...A count of every inventory item held in storage shall be taken

annually on all materials in all warehouses, storerooms, and maintenance shop storage areas....”

SAM, Section 10860, Physical Inventories, states in part: “At least once every three months a designated employee, preferably not the storekeeper or custodian of the property, will take a complete physical inventory...Any differences which cannot be located will be listed, together with any pertinent explanation, and sent to the business manager. The business manager, after he has satisfied himself as to the propriety of the adjustments, will authorize the adjustment of the stock records by signing the list of inventory adjustments....”

Materials Management Handbook, page 95, states in part: “At all facilities used to store and distribute materials, entry-exit controls must be in place to restrict unauthorized personnel from having access to inventory.”

Recommendation

Ensure that no one person has significant control over the inventory, utilize the SLAMM system, maintain stock records, conduct spot checks, ensure physical inventories and reconciliations are conducted and prepare adjustment documents for management review. Additionally, ensure access to inventory is restricted.

B. Maintenance Warehouse

1. Separation of Duties, Inventory and Access

Separation of duties is inadequate. The M&SS I, CF and M&SS II, CF have significant control over the inventory. They prepare the Form 5, receive and maintain inventory, process requisitions, and perform physical counts of inventory. Additionally, the physical inventory is not current or accurate. A spot check was conducted and five of the ten items tested did not reconcile to the SLAMM inventory report. Inventory adjustments sheets are not forwarded to the Business Manager for review and approval prior to making adjustments and access is not restricted, when eight employees have keys to the warehouse.

This condition may result in late detection of errors, irregularities, theft, and/or misappropriation.

SAM, Section 20050, states in part: “. . . elements of a satisfactory systems of internal accounting and administrative controls, shall include, but are not limited to: A plan of organization that provides segregation of duties appropriate for proper safeguarding of states assets. . . .”

DOM, Section 22030.10.1, Records Maintained, states in part: “The stock record, which serves as a joint purchasing/financial/operational record, shall be kept current and accurate at all times. . . .”

SAM, Section 10860, Physical Inventories, states in part: “The business manager, after he has satisfied himself as to the propriety of the adjustments, will authorize the adjustment of the stock records by signing the list of inventory adjustments. . . .” Materials Management Handbook, page 95, states in part: “At all facilities used to store and distribute materials, entry-exit controls must be in place to restrict unauthorized personnel from having access to inventory.”

Recommendation

Ensure that no one person has significant control over the warehouse inventory, ensure stock records are accurately maintained, conduct spot checks, ensure physical inventories and reconciliations are conducted. Additionally, ensure inventory adjustments are prepared and forwarded to the Business Manager for approval and ensure access to inventory is restricted.

2. Returned Stock Reports

Returned Stock Reports are not processed appropriately. Returned goods are documented in a log book but the actual Std. 108 is not prepared or forwarded to the Accounting Office.

This condition may result in overpayment.

SAM, Section 10808, Vendors’ Invoices, states in part: “If it becomes necessary to return certain goods for which Stock Received Reports have been issued, their return will be recorded on Returned Stock Report, Std. Form 108. A copy of this report will be sent immediately to the accounting office. . . . Returned Stock Reports will be filed with the Stock Received Reports. . . .”

Recommendation

Ensure the Std. 108 is prepared to document delivery issues and forwarded to the Accounting Office.

C. Inmate Trust Accounting

1. Inmate Fund Raisers

The inmate organization entitled, EDGE, has organized three fund-raisers within a 12 month period of which two were not authorized by the Warden.

This condition results in unauthorized fund raisers.

KVSP’s EDGE Bylaws, states in part: “. . . may organize fund-raisers annually at the Warden discretion. . . .”

SAM, Section 19440.1, states: “Each trust account established shall be supported by documentation as to the type of trust, donor or source of trust

moneys, purpose of the trust, time constraints, persons authorized to withdraw or expend funds, specimen signatures, reporting requirements, instructions for closing the account, disposition of any unexpended balance, and restrictions on the use of moneys for administrative or overhead costs. This documentation will be retained until the trust is dissolved.”

Recommendation

Organize fund-raisers in accordance to the by-laws associated with the group account.

D. Payroll/Personnel

1. Distribution of Warrants

Separation of duties is inadequate over the distribution of payroll when 7 of the 15 paymasters are also unit timekeepers who distribute salary warrants.

This issue could result in late detection of errors and/or irregularities.

SAM, Section 8580.1, Duties Incompatible with Handling of Salary Warrants, states: “Persons designated by agencies to receive salary warrants from SCO [State Controllers Office], or to distribute salary warrants to employees, or to handle salary warrants for any other purpose will not be authorized to process or sign any of the following personnel documents: Absence and Additional Time Worked Report for, Std. 634 (which has been replaced by the CDC 998-A [Employee Attendance Record]).”

Recommendation

Ensure that paymasters are not unit timekeepers and/or process personnel documents.

2. Nepotism

There is a case of nepotism in the Personnel Office when a mother and daughter report to the same supervisor.

The relationship could effect or adversely influence safety, security, and morale, fair and impartial supervision.

DOM, Section 33010.25, Nepotism/Fraternization, states in part: “Employees involved in such relationships may work in the same program, section, or unit. However, appointments or assignments shall not be made where the employee would:

- Work for the same supervisor.
- Have a direct (first line supervisor), or indirect supervisory relationship (second line supervisor)....”

Recommendation

Review all areas for any other possible relationships that violate the Nepotism policy and resolve the issue. Also, provide training on the Nepotism policy and monitor the process for compliance.

IV. LATE DETECTION AND ADDITIONAL WORKLOAD

A. Personnel

1. Suspended Payments

As of December 2008, there are 21 suspended payments that have not been cleared within 90 days and one dates back to April 2006

This condition could result in difficulty resolving outstanding payments.

PPM, Section I406, Suspended Payments, states: "A valid payment or adjustment is tested for a series of conditions before being released. If a payment or adjustment fails to meet all the requirements, it is withdrawn for later release and placed on the Suspended Payment File."

Recommendation

Clear the suspended payment report and establish a procedure to monitor the process for compliance.

2. Std. 672

The Std. 672, is completed in pencil instead of in ink. This occurred in five of the nine Std. 672s reviewed.

If this attendance practice continues, it could result in manipulation of time paid and late detection of inappropriate use of leave.

PPM, Form Completion, A 012, states: "Following are general instructions that apply to the completion of all payroll related forms. 1. All documents must be typed or printed in ink."

Recommendation

Provide training to Personnel Specialists regarding the State Controller's procedure for completing forms and monitor the process for compliance.

3. Hiring Over Budget

Currently, there are seven unauthorized permanent full-time positions appointed into the 918 blanket. Two of the positions date back to February 2008 and are in Plant Operations. The chart below details the classifications, the pay periods in the blanket, and the amount of each over expenditure.

Classification	Pay Periods	Amount of Over Expenditure
Carpenter II	May 2008– November 2008	\$32,291.00
Two Electronic Technicians	February 2008 – November 2008	76,668.00
Heavy Equipment Mechanic	May 2008– November 2008	30,968.00
Lead Groundskeeper	May 2008 – November 2008	19,719.00
Maintenance Mechanic	May 2008 – November 2008	30,289.00
Stationary Engineer	March 2008 – November 2008	48,735.00
Total Amount of Over Expenditure:		\$238,670.00

This issue results in over expenditure of the budget authority by \$238,670.00, during the 2008 calendar year.

SAM, Section, 8531, Established Positions, states, “No employee may be appointed except to a position which has been properly established and approved by the Department of Finance to fix its class title, duration, organizational function, and the budget allotment from which the salary is payable.”

Recommendation

Review and monitor the current number positions in 918 blanket and the likelihood of vacant positions to move these employees into and take the appropriate action.

4. Hiring Packages

The hiring package for the Correctional Administrator interviews conducted January 2 through January 4, 2008, did not include the interview questions for the candidate hired. In addition, the hiring package for the Personnel Supervisor listed on the Std. 607 log for September 1, 2005, could not be located.

This issue could result in difficulty providing documents for responses to inquiries and grievances.

Hiring Process Memorandum dated April 21, 2003, states in part: "All hiring interview and reference materials should be kept in a secure and confidential area.... The material should include a copy of the JOB and any other recruitment information, all applications received, screening criteria, interview questions, rating criteria, panel members' notes, and hiring justification or notes."

Recommendation

Ensure that all necessary documentation is maintained in all hiring packages and retained for future use.

B. Plant Operations

1. Emergency Generators

There are several deficiencies related to managing emergency generators. For example:

- There are no local operating procedures.
- Testing dates are not logged.
- Log books do not identify the asset number, start time, end time and are disorganized.
- Fuel purchased, delivered and used is not adequately documented.

These issues make it difficult to validate that emergency generators are tested timely and properly maintained.

IMU Memorandum, "Emergency Power Generator Systems" dated December 21, 1999 directs institutions to conduct load bank test on emergency generators and recommends that the institution incorporate all assets and task into the SAPMS.

Notice of Change to DOM (NCDOM) transmittal letter 00-01, states: "Each institution/facility and parole region shall independently implement local procedures in accordance with all applicable laws and regulations governing those policies and procedures which are not covered by an approved DOM article."

San Joaquin Valley, Air Pollution Control District, Permit to Operate, Section 15, requires that: ". . . the permittee shall maintain records of emergency and non emergency operation. Record shall include the number of hours of emergency operation, the date and number of hours of all testing and maintenance operations, the purpose of the operation (for example load testing, weekly testing, rolling blackout, general area power outage etc.) (District Rule 4702)...."

San Joaquin Valley, Air Pollution Control District, Permit to Operate, Section 18, states: "The permittee shall maintain monthly records of the type of fuel purchased, the amount purchased, signature of the permittee who received the fuel, and the signature of the fuel supplier indicating that fuel was delivered."

Recommendation

Comply with the CDCR, IMU guidelines and incorporate all tasks related to Emergency Generators into the Facility Center database. Additionally, comply with county operating conditions and the DOM. Lastly, initiate and maintain records in accordance with the NFPA.

2. Cross-Connection Program

The following deficiencies are noted regarding the cross-connection program (i.e., backflow):

- The master list does not reconcile to asset history reports.
- It could not be determined whether backflow devices are tested annually and those that failed were tested and subsequently repaired or surveyed.
- There is no published cross-connection schedule for 2008.

These issues result in difficulty determining whether backflow device tests have been performed.

CPC, Section 603.3.2, states: "The premise owner or responsible party shall have the backflow prevention assembly tested by a certified backflow assembly tester at the time of installation, repair, or relocation and at least on an annual schedule thereafter or more often when required."

SAPMS, states: "Establish an effective and efficient (PM) procedure. This procedure must establish the systematic maintenance of all major institutional facilities and equipment."

DHS, Drinking Water and Environmental Management Division, recommends that test results should be kept on file in a central location.

Recommendation

Create a master list or use plot plans to identify all cross-connection locations and devices, maintain accurate data within the SAPMS database and test on an annual basis. Provide training to staff.

3. HVAC

The maintenance of the HVAC is inadequate. See the chart below:

Building and Location		Asset/Equipment Number	Most current PM and corrective work order history
801	Central Administration	430000013027	March 2008.
1101	Central Health Services	430000049427	Per asset history reports, PM was not performed for five of 12 months in 2008 (41 percent).
1101	Central Health Services	430000043435	Had only one documented PM procedure in 2008.
1201	Central Kitchen	430000010066	April 2008.
341	Facility C 1-2	430000013274	Had only one documented PM procedure in 2008.
341	Facility C 1-2	430000011134	Had no documented PM procedure in 2008.

This condition may render the PM program ineffective, decrease efficiency, increase downtime and may result in additional costs.

DPOMPM and SAPMS, states in part: ". . . establish an effective and efficient PM procedure. This procedure must establish the systematic maintenance of all major institutional facilities and equipment...Without such program equipment will wear out prematurely, structures will deteriorate, and efficient function of the facility will be compromised...The Correctional Plant Manager (CPM) shall complete a review, at least monthly...This procedure will be reviewed and updated annually."

Recommendation

Comply with the methods of a PM program.

4. PM

The methods of a PM program are not followed. For example:

- PM procedures have not been approved by the Associate Warden, Business Services, and Warden.
- Asset history reports are not requested or reviewed by supervisors.
- A PM program is not adhered to in Food Services. Eighty-three percent of the 52 assets tested are not maintained or scheduled for PM.
- Equipment/assets are not always clearly identified with the standard equipment code on each piece of equipment (SAMPS tags). This condition was noted in Food Services where 100 percent of assets tested are not tagged.

- Equipment Maintenance Summary Data are not used timely to place new assets on a PM schedule.
- Institutional goals are not met by the Stationary Engineers, Painters, Plumbers, and Maintenance Mechanics, per their duty statements. The essential duties and responsibilities state that 50 percent of their time is to be spent performing PM. The POM report indicates that considerably less time is spent performing PM.
- A standardized method to account for parts, materials and labor related to PM has not been established.

These conditions may render the PM program ineffective, decrease efficiency, increase downtime and result in additional costs.

CCR, Title 15, Subchapter 5 Article 1, Section 3380(c), states in part: "Subject to the approval of the Director of Corrections, wardens, superintendents and parole region administrators will establish such operational plans and procedures as are required by the director for implementation of regulations and as may otherwise be required for their respective operations. Such procedures will apply only to the inmates, parolees, and personnel under the administrator...."

SAPMS, states in part: ". . . establish an effective and efficient PM procedure. This procedure must establish the systematic maintenance of all major institutional facilities and equipment...Without such program equipment will wear out prematurely, structures will deteriorate, and efficient function of the facility will be compromised."

DPOMPM, states in part: "The CPM shall complete a review, at least monthly...."

DPOMPM, Section 2.D.5 and SAPMS, states, "All equipment will be clearly identified by placing the unique standard equipment code on each piece of equipment...Transfer equipment data from the Equipment Maintenance Summary Data Sheets following the guidelines in the Departmental Standard Plant Operations Maintenance Procedures Manual and develop assignment schedules for the completion of the PM...."

H&SC, Section 114175, states: "All food facilities and all equipment, utensils and facilities shall be kept clean, fully operative, and in good repair."

Recommendation

Comply with the methods of a PM program.

5. POM Report

The POM report does not accurately reflect Plant Operations activities. During the period sampled, May 2008 through October 2008, the following deficiencies are noted:

- The POM report is not routed and reviewed by the Warden.

- Electronic Technicians, Electricians, Hazardous Materials Specialist, Maintenance Mechanics, Stationary Engineers, and the Telecommunication Analyst are not meeting the minimum hours for a pay period based on the POM report.
- Priorities are inaccurate. For example, a Priority 3 designation is used instead of a Priority 5 for in-house projects Work Order numbers 65019 and 65017).

These issues result in inaccurate information provided to management for decision making.

DOM, Section 11010.21.4, states: "Compile information from monthly reports as appropriate."

SAPMS, states: "Routing copies of the report to the following: Warden, Correctional Administrator, Business Services, and Correctional Plant Manager."

Recommendation

Validate, and review reports to determine that they accurately reflect Plant Operations activities.

6. Inmate Supervisors Timekeeping Log

The CDC 1697 is not properly maintained. The Audits Branch noted the following deficiencies at all locations:

- Reasons for using Exceptional Time, (e.g., Excused (E), Absent (A), and Security(S)) are not documented.
- Xeroxed copies of the CDC 1697 are used, and do not have non correctable copies attached.
- There are no IWTIP guidelines.

These issues result in an inaccurate documentation of inmate work time.

CCR, Title 15, Section 3045, Timekeeping and Reporting, states in part: "(a) Inmate timekeeping logs. Attendance of each inmate assigned to a credit qualifying assignment shall be recorded daily on an approved timekeeping log...Supervisors shall be responsible to record and report all work/training time and absence...."

Recommendation

Complete the CDC 1697 as events occur. Maintain IWTIP documents in accordance with IWTIP guidelines and the CCR, Title 15.

C. Inmate Trust Accounting

1. Parole Release Fund Reconciliation

The Parole Release Fund Reconciliations are not reviewed on a consistent basis. Seventy percent of the reconciliations reviewed are missing the reviewer's signature and date.

This condition may result in late detection of errors and irregularities.

SAM, Section 7908, states: "All reconciliations will show the preparer's name, reviewer's name, date prepared, and date reviewed."

Recommendation

Complete all areas of the reconciliation.

2. Undelivered Salary Warrants

There are 8 undelivered salary warrants maintained in the trust office that have not been delivered and/or returned to the State Treasury's office within 90 days. The oldest hold dates back to January 28, 2008.

This condition could result in the potential loss of interest or possible misappropriation of the unclaimed salary warrants.

SAM, Section 8580.5, states: "Warrants not delivered within 90 calendar days of receipt must be deposited and remitted to an escheat revenue account in the original fund that provided the resources to the State Payroll Revolving Fund."

Recommendation

Remit unclaimed payroll warrants over 90 days to an escheat revenue account.

3. Checks

Cancelled, cleared and voided checks are not systematically maintained and organized. As a result, several voided and cancelled checks could not be located.

This issue makes it difficult to audit checks and may result in late detection of errors, irregularities, theft, and/or misappropriation.

SAM, Section 8041, states in part: "All copies of voided checks will be retained by the agency for audit...Agency files will contain records as to the disposition of specimen checks."

Recommendation

Establish an organized system for all cancelled, cleared, and voided checks.

D. Property

1. Cost

The PCS report does not always reflect the cost of property and/or the purchase order number. For example, the PCS report for the armory has 184 entries, of which 48 (26 percent) do not have cost associated with the inventory.

This condition may result in understating the cost of property and may lead to poor inventory management.

DOM, Section 22030.10.5, Setting Levels, states: "Setting levels shall assist personnel who maintain stock to have on-hand materials when they are needed. Levels are set to ensure that stock shall not be depleted. The Department shall use the minimum/maximum concept to set the majority of supply levels."

Recommendation

Ensure property is recorded in accordance with SAM.

E. Food Services

Over 100 CDC 1697s were reviewed. Several deficiencies were noted. For example:

- Three different versions of the form were used as well as white Xeroxed copies.
- Initials instead of signatures were used.
- Exceptional time was not explained.
- DMS numbers and transfer in dates were not recorded, and not all inmate job descriptions were signed.
- At the C-1 kitchen, a Correctional Officer (CO) signed the inmate workers in/out for the entire week of December 8, 2008 through December 12, 2008.
- At the D-4 kitchen, the CO was completing the CDC 1697s for both the Correctional Supervising Cooks inmate workers and his inmate workers.
- The CDC 101, Work Performance Evaluation, was not prepared for the inmate workers as required.
- The Salinas Valley State Prisons IWTIP handbook, dated December 2000, was used instead of one designed for KVSP.

These issues may result in possible overpayment to inmate workers, inaccurate documentation of inmate time worked, and inmates unaware of their job performance.

CCR, Title 15, Section 3045, Timekeeping and Reporting, states part: “(a) Inmate timekeeping logs. The attendance of each inmate assigned to a credit qualifying assignment shall be recorded daily on an approved timekeeping log. If the assignment began or ended during the reporting month, the date(s) of such activity shall be recorded on the timekeeping log. Only the symbols designated on the timekeeping log shall be used to document the inmate’s attendance. The symbol(s) and applicable hours for each day shall be recorded in the space corresponding to the calendar day . . . shall be retained at a secure location...for a period of four years from the date of completion. (1) Staff shall record the work or training time and absences of each inmate assigned to their supervision each day as they occur....”

Recommendation

Ensure that the most current CDC 1697 is used to record inmate time. Provide training to staff on the proper completion of the CDC 1697. Ensure inmate job descriptions are signed by inmates, and complete the CDC 101, Work Performance Evaluation, as required. Lastly, develop IWTIP guidelines for KVSP.

V. POLICIES AND PROCEDURES

A. Plant Operations

There is no institutional approved operating procedure for the PCT.

Employees may not be aware of current rules, regulations and processes related to PCT activities.

CCR, Title 15, Subchapter 5, Article 1, 3380(c), states in part: “Subject to the approval of the Director of Corrections, wardens, superintendents and parole region administrators will establish such operational plans and procedures as are required by the director for implementation of regulations and as may otherwise be required for their respective operations. Such procedures will apply only to the inmates, parolees, and personnel under the administrator....”

Recommendation

Develop a written procedure outlining the tracking, notification and monitoring of the PCT activities.

VI. TRAINING

A. Plant Operations

Attendance in general and OJT training is inadequate based on IST documentation. There are 61 rank and file and nine supervisory staff in Plant Operations. Based on the review of 6 training courses, attendance ranges from 0 percent to 74 percent. The table below identifies the participation percentage for rank and file employees and supervisors:

Training Course	Percentage of Rank and File Attendance	Percentage of Supervisors Attendance
Tool & Key Control	67	33
Universal Precautions/Blood Borne Pathogens	41	22
Hazardous Materials	74	67
IIPP	20	10
Confined Space	6	0
Respiratory Protection	46	33

This issue may result in employees not being aware of current policies and procedures, and not using state practices related to conducting Plant Operations activities.

DOM, Section 32010.5, Definitions:

Training

The process whereby Department employees, either individually or in groups, participate in a formalized, structured course of instruction to acquire skills and knowledge for their current or future job performance. These organized activities shall contain measurable learning objectives that can be evaluated in a classroom setting or in structured OJT.

Job-Required Training

Job-required training is designed to assure adequate performance in a current assignment. This includes orientation training made necessary by new assignments or new technology, refresher training, and training mandated by law or other State authority.

Job-Related Training

Job-related training is designed to increase job proficiency or improve performance above the acceptable level of competency established for a specific job assignment. It prepares the employee to assume increased responsibilities in their current assignment.

Upward Mobility Training

Designed to provide career movement opportunity for employees within classifications or job categories designated by the Department as upward

mobility classifications. Includes training to facilitate movement of employees from designated classifications into other classifications with increased career opportunities.

Recommendation

Review IST training documents to determine the training needs of staff. After review, schedule training as necessary, and monitor the process for compliance.

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH**

KERN VALLEY STATE PRISON

GLOSSARY

AB	Administrative Bulletin
BU	Bargaining Unit
CAP	Corrective Action Plan
CCR	California Code of Regulations
CDC 998-A	Employee Attendance Record
CDCR 1697	Inmate Work Supervisor's Time Log
CDCR	California Department of Corrections and Rehabilitation
CF	Correctional Facility
CHSA	Correctional Health Services Administrator
CO	Correctional Officer
CPC	California Plumbing Code
CPM	Correctional Plant Manager
DHS	Department of Health Services
DOM	Department Operations Manual
DMS	Daily Movement Sheet
DPA	Department of Personnel Administration
DPOMPM	Departmental Plant Operations Maintenance Procedures Manual
EDGE	Education, Division & Goals to Endeavor
Form 108	Returned Stock Report
GISO	General Industry Safety Orders
H&SC	Health and Safety Code
HVAC	Heating, Ventilation, and Air Conditioning
IDP	Individual Development Plans
IIPP	Injury and Illness Prevention Plan
IMU	Institutions Maintenance Unit
IST	In-Service Training
KVSP	Kern Valley State Prison
IWTIP	Inmate Work Training Incentive Program
M&SS	Materials and Stores Supervisor
NCDOM	Notice of Change to DOM
NFPA	National Fire Protection Association
OAC	Office of Audits and Compliance
OJT	On-the-Job-Training
ORM	Office of Risk Management
PCS	Property Control System
PCT	Pest Control Technician
PM	Preventive Maintenance
POM	Plant Operations Maintenance Report
PPM	Payroll Procedure Manual
PTM	Personnel Transactions Manual

SAM	State Administrative Manual
SAPMS	Standard Automated Preventive Maintenance System
SLAMM	State Logistics and Materials Management
S td. 108	Returned Stock Report
S td. 607	Change in Established Positions
Std. 672	

SAMPLE FORMAT CORRECTIVE ACTION PLAN				
Item #	Audit Finding	Responsible Personnel	Proposed Action	Date to be Completed
A.1	WRITTEN NOTICE Of the 30 records reviewed, 24 (80 percent) contained a clearly stated date and reasons for placement in part I, Notice of Reasons for Placement date. The remaining three records failed to clearly document the reason for placement in sufficient detail to enable the inmate to prepare a response or defense.	Facility Captain Do Not use individuals names and do Not use Acronyms.)	A. Facility Captains will ensure that each inmate placed in Administrative Segregation will have the placement date included on all CDC 114-Ds processed. B. Training will be provided by the Facility Captains to ensure sufficient information is documented in abundant detail in order for an inmate to articulate a response or defense	2/2/2006

OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH
LIST OF KVSP CENTRAL AND SATELLITE KITCHEN DEFICIENCIES

Finding/Location	CENTRAL KITCHEN	B1	B2	B4	C1	C2	C3	C4	D1	D2	D3	D4	E	ASU #2
This unit door bottom and inside bottom is peeling from wall, frame is broken and doesn't allow door to lock. Reefer F-1	X													
This unit has six lights, one is out, the floor surface is dirty, and door is broken and hard to lock. Freezer L and Produce Reefer	X													
The door trimming is coming apart, inside and outside of the door. Freezer A, Lunch Reefer & Bread Box	X													
The rubber sealing is coming out at the bottom. Produce Reefer	X													
There are four ovens, of which only two works.	X													
Mold is forming on the inside rubber seal. Bread Box and Chill Blaster Box	X													
The door bottom, inside bottom is peeling from the wall, door frame is broken, metal plates under door is filled with water and not mounted to the floor and floor tile is broken. Chill Blaster Box and Bakery Room	X													
Flour dust is on racks and all over the area. Bakery, Storeroom and Hot Room	X													
One of the four steamers is broken and missing parts.	X													
The oven leaks gas. Kosher Kitchen	X													
The tilting kettle contained food debris around the bottom and on gadgets of the kettle; and was full of water & tilting. Bakery	X													
Sanitation of the area was insufficient. Bakery, Storeroom and Hot Room	X													
No Drying racks to dry serving trays, therefore, trays are stacked and drying is inadequate.	X											X	X	
Dishwashers work intermittently or not at all; temperature only reached 100°F at C-1, instead of 180°.					X			X						
Hand washing signs are missing in the kitchen and/or inmate restrooms.			X	X	X	X	X	X	X	X	X		X	
There is no soap and/or drying devices at the sink and/or in inmate restrooms.		X	X	X	X	X	X	X	X	X	X	X	X	
Dining hall walls, tables and stools are not sufficiently clean.					X						X	X	X	
The kitchen floors and floor drains in the dining hall, kitchen and behind ice machine contained debris.					X		X	X		X	X		X	

OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH
LIST OF KVSP CENTRAL AND SATELLITE KITCHEN DEFICIENCIES

Finding/Location	CENTRAL KITCHEN	B1	B2	B4	C1	C2	C3	C4	D1	D2	D3	D4	E	ASU #2
The ice Machine is not locked; and buckets/trays are used to scoop ice.		X	X	X	X	X	X	X	X	X	X	X	X	X
Trash is piled up outside the entrance door to the kitchen.		X	X	X	X	X	X	X	X	X	X	X		
The floor to the door areas is badly soiled.						X								
Dead man trays are missing.														X
Steam lines are inoperable.		X	X	X	X	X	X	X	X	X	X	X	X	X
Dish towels are inappropriately dried on bottom of garbage cans.												X		
Pot holders are not cleaned.													X	
Ceiling vents are dirty.							X			X				
Mildew/unknown black substance exists at tile and backsplash above sink and behind the dishwasher.				X			X			X	X	X		
No dishwashing soap for one week in the kitchen.												X		
The garbage disposal works intermittently or not at all; and it contains trash/paper items.		X	X	X	X	X	X	X	X	X	X	X	X	
The walk-in is not lockable.		X	X	X	X	X	X	X	X	X	X	X		X
The hoods/screens are dirty.							X	X					X	
The fan covers and vent covers are dirty.							X				X			
Reach-in refrigerators are dirty.							X				X	X		
Dry storage room is dirty.											X	X	X	
Grill trays are dirty as well as underneath the grills.				X				X					X	
The oven has been inoperable for six months.													X	
There is no hot water, dishes are washed in gray tubs; and hot water is retrieved from the coffee pot.								X						
Pieces of cardboard holds the doors of a re-thermalization unit closed and the units are also dirty.										X			X	

**OFFICE OF AUDITS AND COMPLIANCE
AUDITS BRANCH
LIST OF KVSP EQUIPMENT (WALK-IN AND REACH-IN
REFRIGERATORS/FREEZERS) DEFICIENCIES**

Finding/Location	Central Kitchen	B2	B4	D1	D2	D3	D4	All Units
Sealing and/or rubber gaskets inside doors are worn.	X					X		X
Condenser pipe is leaking water.			X				X	
Door frames of units are missing sections, inside and/or outside.								X
Metal trim at the bottom, around the walls, inside and outside, are missing sections.			X		X	X		X
Doors do not align up sufficiently with the door frame and the insulation can be seen from the outside.						X	X	
Standing outside the unit, you can see inside the unit.		X						
Inside the units the insulation is exposed at the sides, top and/or bottom of the unit.								X
The date is written on some of the insulation that indicates the date the pieces of metal were removed.			X					
Doors cannot be locked; devices were removed as well as the metal bars that were placed across the doors with locks.	X							X
At least one light bulb is inoperable.	X					X		
Metal covers for hinges on the reach-ins were removed and when the doors are opened they may fall off.		X		X	X			X
All refrigeration and freezer units are deteriorated in the Food Services department.								X
Note: All units refer to each refrigeration unit located in the Central and Satellite Kitchens on A, B, C, and D yards.								

California Department of Corrections and Rehabilitation
Office of Audits and Compliance
Information Security Office



Information Security Review
KERN VALLEY STATE PRISON
December 1 through December 12, 2008

**Information Security Compliance Draft Review
Kern Valley State Prison
December 8-12, 2008**

The Office of Audits and Compliance, Information Security Branch (ISB), conducted an Information Security Compliance Review of Kern Valley State Prison (KVSP) between the dates of December 8 through December 12, 2008. The review covered 18 different areas. KVSP was compliant in 15 areas, partially compliant in 1 area, and non-compliant in 2 areas. The overall score for the institution is 95 percent. The chart below summarizes these outcomes.

FINDINGS SUMMARY:

		Score	Compliant	Partial Compliance	Non Compliant
STAFF COMPUTING ENVIRONMENT					
1.	Use Agreement (Form 1857) is on file.	100%	C		
2.	Annual Self-Certification of Information Security Awareness and Confidentiality forms are on file.	63%			N
3.	Information security training is current.	56%			N
4.	Staff log on using own password.	100%	C		
5.	Network access authorization is on file.	100%	C		
6.	Physical locations of CPUs agree to inventory records.	100%	C		
7.	Staff CPUs labeled "No Inmate Access."	100%	C		
8.	Staff monitors are not visible to inmates.	100%	C		
9.	Anti virus updates are current.	89%		PC	
10.	Security patches are current.	95%	C		

INMATE COMPUTING ENVIRONMENT (Education, Library, Clerks)					
11.	Physical location of CPUs agree to inventory records	100%	C		
12.	CPU labeled as inmate computer.	100%	C		
13.	Anti virus updates are current.	100%	C		
14.	Inmate monitors are visible to supervisor.	100%	C		
15.	Portable media is controlled.	100%	C		
16.	Telecommunications access is restricted.	100%	C		
17.	Operating system access is restricted.	100%	C		
18.	Printer access is restricted.	100%	C		

Total of Tests

15	1	2
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Overall score 95 percent

**Information Security Compliance Draft Review
Kern Valley State Prison
December 8-12, 2008**

OBJECTIVES, SCOPE, AND METHODOLOGY

The objectives of the Information Security Compliance Review were to:

- Assess compliance to selected information security requirements;
- Evaluate other conditions discovered during the course of fieldwork that may jeopardize the security of information assets of the facility or of the Department; and
- Provide information security training for management and staff.

The ISB did not review any Prison Industry Authority computers.

In conducting the fieldwork the ISB performed the following procedures:

- Interviewed senior management, information technology staff, institutional staff, and computer users.
- Asked staff to provide evidence that all authorized computer users had Acceptable Use Agreement forms and appropriate training support documentation on file.
- Tested selected information security attributes of users and information technology (IT) equipment using three different population samples. This included both the staff and inmate computing environments.
- Reviewed various laws, policies and procedures, and other criteria related to information security in the custody environment.
- Conducted physical inspection of selected computers.
- Observed the activities of the information technology support staff.
- Analyzed the information gathered through the above processes and formulated conclusions.

**Information Security Compliance Draft Review
Kern Valley State Prison
December 8-12, 2008**

FINDINGS AND RECOMMENDATIONS

The ISB provided a copy of our review guide to your IT staff. It contains criteria and detailed methodology. That information; therefore, is not duplicated under each finding.

ISB's findings and recommendations are listed below. ISB staff discussed them with management in an exit conference following ISB's fieldwork. Please contact us if you would like to discuss any of these issues further.

- 1. The Security Awareness Self-Certification and Confidentiality Agreement form is not on file for all computer users. (63 percent compliant.)**

Recommendation: Require all computer users to self-certify their information security awareness and confidentiality agreement on an annual basis using form CDCR ISO-3025 or equivalent. (DOM, Section 49020.10.1.)

Best Practice: Required forms can be found on the Information Security Office's intranet web site <http://intranet/PED/Information-Security/>.

- 2. Information Security training is not current for all computer users. (56 percent compliant.)**

Recommendation: Review information security training procedures and training records maintenance. Require that all computer users receive annual information security training. Require and practice appropriate documentation of the training. (DOM, Sections 49020.14.1 and 41030.1.)

Best Practices: The Security Awareness Training material can be found on the Information Security Office's intranet web site. <http://intranet/PED/Information-Security/>

- 3. All staff computers do not have up-to-date antivirus software. (89 percent compliant.)**

Recommendation: Update antivirus software on all staff computers at least on a monthly basis. (DOM, Section 48010.9.)

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

EDUCATION
COMPLIANCE

KERN VALLEY STATE PRISON

DECEMBER 1 THROUGH DECEMBER 12, 2008



CONDUCTED BY

EDUCATIONAL COMPLIANCE BRANCH

EXECUTIVE SUMMARY

OFFICE OF AUDITS AND COMPLIANCE

EDUCATION COMPLIANCE BRANCH REVIEW

Kern Valley State Prison

December 8-12, 2008

TEAM MEMBERS:

*Raul Romero, Associate Superintendent, OAC
G. Lynn Hada, Principal, OAC
Beverly Penland, Vocational Vice-Principal, OAC
Donna La Rue, Academic Vice-Principal, CSATF
Jan Stuter Principal Librarian, OCE
Mark Lechich, Academic Vice-Principal, OCE-WIA
Sarita Methani, Principal, OCE-EASA, EOP, DDP, DPP
Gary Sutherland, Associate Superintendent, OCE*

220 Areas Reviewed

CATEGORIES	PERCENTAGE OF COMPLIANCE 2008	% Compliance Sept. 2007
Education Administration	19 ÷ 49 = 39%	31%
Academic Education	26 ÷ 59 = 44%	72%
Vocational Education	21 ÷ 38 = 55%	26%
Library/Law Library	16 ÷ 28 = 57%	36%
Federal Programs	40 ÷ 46 = 87%	88%
Special Programs*	N/A %	N/A
Total:	122 ÷ 220 = 55%	52%

Your corrective action plan (CAP) must address each of the deficiencies listed below for each category with a score in the table above. The CAP must be submitted to the Superintendent of the Office of Correctional Education for review and/or modification. The CAP then is due to the Office of Audits and Compliance (OAC) for review within 30 days after your receipt of the preliminary report from OAC.

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ADMINISTRATION SECTION

I. EDUCATION ADMINISTRATION:

39% COMPLIANCE

Deficiency:

#8 *Are the Education Monthly Report and the Education Daily Report accurate and being completed and submitted on a timely basis?* **The reports are submitted but there are many inaccuracies. (Repeated from 2007)**

#10 *Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned?* **One supervisor's credential was expired. (Repeated from 2007)**

#12 *Are 100% of the staff job descriptions and duty statements on file and applicable to current position?* **A few of the staff duty statements are missing. (Repeated from 2007)**

#14 *Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion?* **The current Kern Valley State Prison (KVSP) Education Operational Procedure does not use Department Operation Manual Chapter 10 as an inclusion. (Repeated from 2007)**

#16 *Are all staff appropriately working and/or assigned within the education program?* **Several teachers are on Administrative Leave; the Distance Learning teacher is currently assigned to an Adult Basic Education classroom leaving the Distance Learning position vacant.**

#26 *Is an approved Alternative Education Delivery Model Operational Procedure in place* **There is a half-time Education/Substance Abuse Program class in operation which an Education/Work model class that is not approved by the May 2008 Alternative Education Delivery Model Operational Procedure CCPOA Agreement.**

#28 *Are all Alternative Education Delivery Model positions filled?* **There is no Distance Learning teacher.**

#30 *Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?* **There are no clear criteria for enrollments/assignments at KVSP. (Repeated from 2007)**

#31 *Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted?* **The classes are not meeting the quotas, some classes are as much as fifty percent under-enrolled per the Education Monthly Report for October 2008. (Repeated from 2007)**

#34 *Are Certificates of Vocational or Academic Completion being issued to those students earning them and recorded on a tracking system? Are Certificates of Achievement issued to those students who exit the program before the completion certification is earned?* **Many teachers are not issuing the proper certificates; a few teachers are issuing them correctly. There is a tracking system in place. It is recommended that training be provided to the teachers. (Repeated from 2007)**

#35 *Are documented staff meetings held regularly by Principal, Academic Vice Principal, and Vocational Vice Principal? (monthly or more)* **The last documented staff meetings minutes available are dated December 7, 2007. (Repeated from**

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ADMINISTRATION SECTION

2007)

#37 *Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis? There are no logs or other documentation maintained in the education office documenting supervisory staff classroom visitations and observations on a quarterly basis. (Repeated from 2007)*

#38 *Does the Academic Vice-Principal/Vocational Vice-Principal provide documented In-Service Training and On-the-Job Training? Have all currently due probationary and annual performance evaluations been completed? Most performance evaluations are past due. (Repeated from 2007)*

#40 *Are Transforming Lives Network quarterly reports being submitted to Office of Correctional Education by the due dates of Oct. 10, January 10, April 10 and July 10? The October Transforming Lives Network quarterly report has not been submitted.*

#41 *Is the Principal trouble shooting Test of Adult Basic Education score losses identified on the School Program Assessment Report Card and implementing remedial changes? Remedial changes to improve the scores have not been implemented by the principal. (Repeated from 2007)*

#43 *Is a list of inmates who have a verified Learning Disability generated and distributed to appropriate staff? There is no Learning Disability list generated or distributed to appropriate staff.*

#44 *Has the education program been accredited by Western Association of Schools and Colleges, or has the application for accreditation been submitted to Western Association of Schools and Colleges? The school has never been accredited. The education program not been accredited by Western Association of Schools and Colleges school since it opened several years ago. It is recommended that accreditation be prioritized to be completed as soon as possible. All accreditation steps taken should be fully documented. KVSP has the only education program in California Department of Corrections and Rehabilitation (CDCR) that is not accredited. (Repeated from 2007)*

#45 *Is there a continuing Western Association of Schools and Colleges process being followed by the school with the action plans being actively addressed in a timely manner? Is there a leadership team in place and do minutes substantiate regular meetings? There is a leadership team in place but there were no meeting minutes available. (Repeated from 2007)*

#46 *Do academic, vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)? All classes are not meeting the required program enrollment quotas. Some classes are only 50%. Some classes are only 50% full per the October Education Monthly Report. (Repeated from 2007)*

#53 *Is the Literacy Coordinator (Academic Vice-Principal) designated as the Transforming Lives Network Coordinator? No one has been designated as the Transforming Lives Network coordinator.*

#54 *Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to Office of Correctional Education? There are no Transforming Lives Network reports.*

#55 *Has Transforming Lives Network enrollment and completion data been tracked? There are no Transforming Lives Network reports.*

#56 *Is there a High School credit program and General Education Development*

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ADMINISTRATION SECTION

Testing program that follows Office of Correctional Education and State requirements? Are High School Diplomas and General Education Development Equivalency Certificates issued to qualified inmates? KVSP is not currently testing for General Education Development and there is no High School program. It is recommended that the GED Testing be prioritized since it is a critical accountability item in performance measurements under AB 900 requirements. (Repeated from 2007)

#57 Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings? There is no Inmate Education Advisory Committee established with regularly scheduled monthly meetings. The vocational programs do hold Inmate Education Advisory Committee meetings but not in all yards. The academic programs do not hold any meetings. (Repeated from 2007)

#58 Do all of the quarterly California Department of Corrections and Rehabilitation Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions? Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available) Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports? Test of Adult Basic Education scores are not consistently recorded on the California Department of Corrections and Rehabilitation Form 154 cards. There are no credits earned being recorded. (Repeated from 2007)

#59 Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) transferred to Central Records when a student leaves education, transfers or paroles? Is the original copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154 or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the RC and transferred to the GP receiving institution? No copies of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) are kept. (Repeated from 2007)

#61 Are literacy programs available to at least 60% of the eligible prison population? Per the October 2008 Education Monthly Report, only a small percentage of the eligible population has literacy programs available to them. It is recommended that activities to implement meeting the Penal Code 2053.1 literacy requirement be prioritized. (Repeated from 2007)

#62 Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal? There is no Site Literacy Committee at KVSP. (Repeated from 2007)

#64 Is the institution utilizing at least two alternate resources to implement literacy services for inmates? There is only one peer tutoring class as an alternate literacy resource and the October Education Monthly Report notes only 12 participants. (Repeated from 2007)

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ADMINISTRATION SECTION

#65 *Is there an established procedure for placing students into any existing Learning Literacy lab? (a federally or non-federally funded Computer-Aided Instruction/Plato/Computer Lab)* **Computers have been purchased and available for some time to start a Literacy Learning Lab but they are still in the receiving warehouse. It is recommended that the computers be set up as soon as possible since the hardware and software will become outdated if not installed soon. (Repeated from 2007)**

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ACADEMIC EDUCATION SECTION

II. ACADEMIC EDUCATION:

44% COMPLIANCE

Deficiency:

#1 Are all of the inmate students' job descriptions accurate, complete, signed, and available? There are several teachers that have been reassigned within the last 90 days whose student files do not contain completed and signed duty statements. The other teachers that have been operating over 90 days or longer did have the appropriate student job descriptions.

#2 Do all the of classroom files reflect Test of Adult Basic Education scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan criteria and Office of Correctional Education Test of Adult Basic Education testing requirements? The Test of Adult Basic Education Test Coordinator has been on extended Jury Duty and since the teachers are dependent on him for coordinating the Test of Adult Basic Education testing process, there are student files without recent Test of Adult Basic Education Test scores or no test scores at all. There is a teacher recently assigned to assist in the Test of Adult Basic Education testing process while the regular Test of Adult Basic Education Testing Coordinator however it appears that he has not been able to catch up on testing or obtaining Test of Adult Basic Education Test scores for all students.

#3 Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure? There are some teachers that do not maintain copies of the California Department of Corrections and Rehabilitation Form 128E within the student files.

#4 Is 100% of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current? Some teachers did not have 100% of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current. One reason is that many teachers just recently received the required standardized textbooks that were in storage at KVSP. (Repeated from 2007)

#5 Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes? There appears to be inaccurate X/S Time recording. This area needs further local review. One example is that of one teacher reporting that a supervisor told her not to report S Time when students are late and that she should note the time on the Permanent Class Record with an Xs designation that is inappropriate and not within Work Incentive Title 15 Regulations for time reporting.

#6 Are Certificates of Completion or Achievement being issued to those students earning them? There are several teachers who do not know the requirements for issuing certificates of completion and certificates of accomplishment. It is recommended that all teachers be given a copy of the Office of Correctional Education certificates policy memo. It is further recommended that written verification be maintained for each teacher as proof of practice that they received a copy of the memo.

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ACADEMIC EDUCATION SECTION

#7 *Do all of the academic education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation approved curriculum?* **Some teachers have lesson plans that do not agree with the California Department of Corrections and Rehabilitation approved curriculum. Lack of textbooks and materials contributes to this problem especially in classrooms with multi-level students.**

#8 *Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?* **No academic or vocational credits are issued for any completed student work or course completions.**

#9 *Do all of the academic education classes have course outlines that agree with the California Department of Corrections and Rehabilitation approved curriculum?* **Only one of the teachers interviewed has a course outline.**

#19 *Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator?* **The test coordinator does not have a computerized master inventory of the test books or answer sheets. There is a manual inventory of the test booklets only. There is no inventory of the answer sheets. It is recommended that the test coordinator find the current count of the answer sheets and then subtract the number used each time answer sheets are issued or used to keep a running balance of answer sheets on hand for inventory accountability.**

#22 *Are teachers testing within 10 days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?* **Most teachers report that they can get a Test of Adult Basic Education score for an inmate most of the time within 10 days. Other teachers report that it takes longer. The Office of Correctional Education December 2, 2008, Test of Adult Basic Education score distribution report indicates that 21.0% of the institution's inmates are not tested. (Repeated from 2007)**

#23 *Are the Test of Adult Basic Education tests administered according to the testing matrix?* **The Office of Correctional Education December 2, 2008, Test of Adult Basic Education score distribution report indicates that 21.0% of the institution's inmates are not tested.**

#25 *Are teachers using pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?* **Some teachers are not using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates. It is recommended that all academic and vocational teachers receive training in this area.**

#26 *Are teachers using the Test of Adult Basic Education test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes?* **Some teachers are not using the Test of Adult Basic Education pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes. It is recommended that all academic and vocational teachers receive training in this area.**

#27 *Are current Test of Adult Basic Education subtests placed in student's file?* **Some teachers are not placing the current Test of Adult Basic Education subtests in all students' classroom files.**

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ACADEMIC EDUCATION SECTION

#28 Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours? There is no evidence that Alternative Education Delivery Model Open Line schedules with dates and times are posted in public areas for inmate access to educational services during off work hours. (Repeated from 2007)

#29 Are the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments? There is no evidence that the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments. (Repeated from 2007)

#30 Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning Study teacher, utilizing the Transforming Lives Network and airing educational programs such as the Kentucky Educational TV General Education Development series on a weekly basis? There is no evidence that the Television Specialist plans, supplements and implements electronic educational coursework with the Distance Learning teacher, utilizing Transforming Lives Network and airing educational programs, such as Kentucky Educational TV General Education Development series on a weekly basis. (Repeated from 2007)

#31 Are teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs? There is no evidence that all Alternate Education Delivery Model teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs. It is recommended that a tracking system be developed so that education supervisors can track certificates issued by each teacher.

#33 Do all of the Education/Work Program classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum? The Education/Work Program (half-time) class was just reactivated again. The Education/Work Program (half-time) class does not have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum.

#34 Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum? The Distance Learning classes do not have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum. The one teacher that handled Distance Learning was moved to the Substance Abuse Program/Education class. Also at least one teacher is acting as a full time college coordinator. This is contrary to California Department of Corrections and Rehabilitation/Division of Education, Vocations and Offender Programs/Office of Correctional Education current funding guidelines. There are no California Department of Corrections and Rehabilitation general funds allocated for funding teacher positions to coordinate college programs or funds for college materials/textbooks. There are teachers being reassigned to various areas at this time and thus stable assignments have not been completed which has created some accountability problems. (Repeated from 2007)

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ACADEMIC EDUCATION SECTION

#35 Do all of the Independent Study classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum? **All of the Independent Study classes do not have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum. Teachers have just recently started receiving required curriculum textbooks. Teachers need more books. (Repeated from 2007)**

#36 Are teachers testing inmates within 10 days of being enrolled or assigned to Alternative Education Delivery Model program? Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? **Students are not uniformly being tested on the Test of Adult Basic Education Test or the Comprehensive Adult Student Assessment System Test. KVSP has extremely low Comprehensive Adult Student Assessment System Post-Test Pay Points. It is recommended that the Comprehensive Adult Student Assessment System testing process implementation be prioritized since it is a critical measurement under the AB 900 performance accountability requirements. (Repeated from 2007)**

#37 Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? **There is no evidence that the Alternative Education Delivery Model current enrolled/assigned inmate roster is it given to the Vice-Principal and Principal on at least a weekly basis.**

#38 Are students' gains being recorded and tracked? **One Alternative Education Delivery Model teacher does not have any evidence that student gains being recorded and tracked. Another keeps records but is having problems receiving Comprehensive Adult Student Assessment System testing materials.**

#50 Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan? **One newly activated classroom in D Facility did not have an Exit sign or clear evacuation plans.**

#64 Are alternate modalities available for use within the housing units for the distant learning program? For example, video, Transforming Lives Network, institutional television, visual worksheets, etc.? **There is no evidence to support any Transforming Lives Network activities. The satellite is working but other than the Physical Education Teacher reporting using an institutional TV channel, there are no other activities reported by teachers. There is no documented evidence that inmates are participating in any Transforming Lives Network activities. (Repeated from 2007)**

#65 Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access? **There is no evidence to support any Transforming Lives Network activities. The satellite is working but other than the Physical Education Teacher reporting using an institutional TV channel, there are no other activities reported by teachers. There is no documented evidence that inmates are participating in any Transforming Lives Network activities.**

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

ACADEMIC EDUCATION SECTION

#66 Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty? There is no evidence to support any Transforming Lives Network activities. The satellite is working but other than the Physical Education Teacher reporting using an institutional TV channel, there are no other activities reported by teachers. There is no documented evidence that inmates are participating in any Transforming Lives Network activities. (Repeated from 2007)

#67 Are school faculty members given the opportunity to provide input into the broadcast schedule? There is no evidence to support any Transforming Lives Network activities. The satellite is working but other than the Physical Education Teacher reporting using an institutional TV channel, there are no other activities reported by teachers. There is no documented evidence that inmates are participating in any Transforming Lives Network activities.

#71 Is California Department of Corrections and Rehabilitation approved State frameworks curriculum being used and are course outlines present? Fitness for Life packets are used. The Office of Correctional Education has not approved the Fitness for Life curriculum for use by Physical Education (PE) Teachers.

#72 Are health education, physical fitness training and recreational activities being provided to the Special Needs populations? Health education is not taught by the Physical Education Teacher. The Physical Education Teacher does provide table and card games to the elderly senior population. Physical fitness activities for the elderly senior population are provided at the minimum facility. It is recommended that the Physical Education Teacher provide sign up sheets for low impact aerobic exercises as well as health related mini-lessons on health, nutrition, special exercises and the quality of life impact created by the aging process for the elderly senior population.

#77 Have the funds for the Recidivism Reduction Strategies funds for the geriatric population been expended for population The Physical Education Teacher has not received Fiscal Year 2008-2009 Recidivism Reduction Strategies funds.

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

VOCATIONAL EDUCATION SECTION

III. VOCATIONAL EDUCATION:

55% COMPLIANCE

Deficiency:

#2 Do all of classroom files reflect Test of Adult Basic Education scores that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan and Office of Correctional Education Test of Adult Basic Education testing criteria? **Most of the student files reviewed did not have a Test of Adult Basic Education test score in the file. Some files had the Test of Adult Basic Education subtest in the files and a few had a California Department of Corrections Rehabilitation Form 128B chronological report listing the test scores. (Repeated from 2007)**

#5 Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs? **The teachers are unable to reflect the minimum student contact time of 6.5 hours of "X" time on the Permanent Class Record Card. The teachers are appropriately giving "S" time when student are not in their programs. The teachers indicated that, due to late release times from some housing units, the students arrive at education late. Also, when officers are redirected classes are released early. (Repeated from 2007)**

#6 Are elective credits in the designated vocational subject being issued to inmates and recorded on the transcript? **None of the teachers are issuing or recording elective credits for their students. Some of the teachers indicated they would like to be able to issue credits for successful competitions of program components; but did not know how to proceed. (Repeated from 2007)**

#7 Are Trade/Industry Certifications being issued and recorded to those students earning them? **The Office Services and Related Technologies teachers have not received Microsoft certification training, needed to issue the appropriate Microsoft certification. The funding for Microsoft training has been requested from the Department of Education, Vocations and Offender Programs, by the Office of Correctional Education. The welding teacher does not have the necessary equipment and supplies to provide the training for the National Center for Construction Education and Research, as well as, the American Welding Society industry certifications. The auto mechanics program is unable to provide the training to issue the Automotive Service of Excellence certification, due to lack of tools, equipment, and hands-on-training projects. The auto mechanics teacher indicated that his program received donations of two automobiles in June 2008. Also recently a 4 wheel drive pick-up was donated, but he has not been allowed to bring the vehicles into the institution. These would provide the hands-on-training necessary to learn this trade. He has also requested from the Principal to offer Employee Services to the staff, thus providing additional hands-on-training projects for the students. It is recommended that the principal work with the institutional managers to identify and locate the original equipment and supplies ordered and delivered that were paid from the Capital Outlay funds. (Repeated from 2007)**

#8 Are Certificates of Completion or Achievement being issued and recorded for those students earning them? **Some of the teachers were unable to appropriately identify the difference or when the Certificates of Completion and Achievement should be issued and recorded for their students. (Repeated from 2007)**

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

VOCATIONAL EDUCATION SECTION

#10 *Do all of the vocational education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation curriculum?* **Some of the teachers said they had just received or had not received their books. Consequently, they did not have lesson plans that agreed with the curriculum.**

#11 *Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?* **One of the teachers did not have a literacy plan for students with a reading score below 9.0. There was no documentation to verify literacy implementation.**

#13 *Are all of the vocational programs that have a nationally recognized certification programs participating in that program?* **The Office Services and Related Technologies teachers have not received Microsoft certification training to issue Microsoft certifications. The funding for Microsoft training has been requested from the Department of Education, Vocations and Offender Programs, by the Office of Correctional Education. The welding teacher does not have the necessary equipment and supplies to issue the National Center for Construction Education and Research and the American Welding Society industry certifications in welding. The auto mechanics program does not have the equipment and training materials necessary to issue the Automotive Service of Excellence Certifications. It is recommended that the principal work with the institutional managers to identify and locate the original equipment and supplies ordered and delivered that were paid from the Capital Outlay funds. Also, it was recommended to the janitorial and landscape teachers to investigate the possibility of trade industry certifications for their students.**
(Repeated from 2007)

#17 *Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?* **The welding program has been open for over one year and is still not operational. The teacher is doing an excellent job under very adverse conditions. The limited equipment in the program is still not connected or operational. Welding booths need to be constructed and there are very limited welding supplies. It is recommended that the principal work with the institutional managers to identify and locate the original equipment and supplies ordered and delivered that were paid from the Capital Outlay funds for the welding program. The teacher has submitted a list of equipment to the Principal, which is needed to provide training. The earning of industry certification is a key element in providing the inmates with the necessary tools for reentry into society upon parole.**
(Repeated from 2007)

#24 *Are 90% or more of the students completing the first six National Center for Construction Education and Research CORE Modules prior to starting the Level 1 for the trade?* **The students are completing the National Center for Construction Education and Research CORE modules before starting the Level I of the trade. However, the welding program needs to have equipment and supplies available for students to begin the Level I section of the welding trade.** **(Repeated from 2007)**

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

VOCATIONAL EDUCATION SECTION

#28 Are teachers testing within three days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix? The teachers indicated that they try to meet the 10 day initial time frame for the Test of Adult Basic Education. Many of the student files did not have test scores to verify that the test time line requirement was being met. It is recommended that if there is a delay in testing, the reason is documented in the student's file. (Repeated from 2007)

#29 Are the Test of Adult Basic Education tests administered according to the testing matrix? Most of the teachers indicated they were aware of the testing matrix. Some of the student files indicated that the test matrix was not being followed. It is recommended that training be provided to the teachers, on how and when to administer the Test of Adult Basic Education. (Repeated from 2007)

#30 Is the Test of Adult Basic Education locator being used when needed to determine which level appropriate Test of Adult Basic Education test to administer? Some of the teachers were not aware that the Test of Adult Basic Education locator test is available and when it is appropriate to administer when testing the students. (Repeated from 2007)

#31 Are teachers using pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates? Not all the students files checked contained the Test of Adult Basic Education subtests. Some teachers stated that when they received the subtests they did review the results with the students. It is recommended that the teacher receive training on the subtests and have the student sign the subtest, documenting that the review took place. (Repeated from 2007)

#32 Are teachers using the Test of Adult Basic Education test results as a diagnostic tool for individualized instruction and trouble shooting Test of Adult Basic Education score losses in their classes? Not all the files checked had the Test of Adult Basic Education subtests in the student file. The teachers stated that if they receive the subtest they review the subtest with the students and try and discover the reason for a score loss with the student.

#33 Are current Test of Adult Basic Education subtests placed in student's file? Not all the files checked had the Test of Adult Basic Education subtests in the student file. The teachers stated that they do not always receive a subtest from the testing coordinator when the student is tested. (Repeated from 2007)

#38 Is there an Inmate Safety Committee that conducts and records weekly safety inspections? One teacher did not have an Inmate Safety Committee established with documentation of weekly safety inspections.

#39 Are safety meetings being held and documented? One teacher stated he held periodic safety meeting and had some documentation available. However, the required one hour per month of safety meetings could not be verified.

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

LIBRARY/LAW LIBRARY SECTION

IV. LIBRARY/LAW LIBRARY:

57% COMPLIANCE

Deficiency:

#2 Is the current Department Operation Manual, Section 53060 available in the main libraries and the satellite libraries? Is there a Department Operation Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operation Manual supplement reflect the current, actual local library program? The newest bound Department Operations Manual was available in every library. In Facility A Library, two additional Department Operations Manuals in 3 ring binders end half-way through the Department Operations Manual—should be discarded. The Senior Librarian has written and rewritten a Department Operations Manual Supplement over the years, but it has never been approved. The Department Operations Manual Supplement could not be found in the Department Operations Manual Supplement 3-ring binder. (Repeated from 2007)

#3 Are library hours of operation posted where GP inmates can see them, and do GP inmates have access to the library during off work hours? Do GP inmates have regular access to non-legal library services? Facility A Hours (no days posted) are on the check-out window only. There is no posting on the library that the Facility A is open 3 days a week. Other libraries post hours on outside of the library. There is window access only on Facility A. Other libraries allow inmates inside if they are not filled with law library users. (Repeated from 2007)

#5 If there are Restricted Housing inmates in the institution, is there a Department Operation Manual supplement relating to their use of the library? Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request? There are none on A Yard. B yard has two Administrative Segregation units and there are two additional Administrative Segregation units on each side of the institution. All Administrative Segregation units have computerized (Legal Library Electronic Data System) law libraries available on their units along with the additional mandated print material. Library staff has provided training for Administrative Segregation staff (CO's). Because of staff turnover, training should be provided at least annually and records checked periodically. (Repeated from 2007)

#7 Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees? If other items are purchased, are they for library use? A major problem is that there are no magazines, Inter-Library Loan fees and limited repair supplies. The Senior Librarian's requests for library materials over the last few years have been repeatedly turned down. (Repeated from 2007)

#11 Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them in? The Senior Librarian checks in the discs. (Repeated from 2007)

EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

LIBRARY/LAW LIBRARY SECTION

#13 *Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than 5 years)? Does the library program have at least three directories relevant to the questions asked by the population served?* **The World Book Encyclopedia is the outdated 2007 edition. (Repeated from 2007)**

#14 *Does each library in the institution have a current world almanac, an atlas that is no more than three (3) years old, an English language dictionary that is no more than five (5) years old, and a Spanish and English dictionary that is no more than ten (10) years old?* **The condition of the existing reference materials is fair to poor. (Repeated from 2007)**

#16 *Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (inc. Spanish language) and Native American materials?* **There are not textbooks for each vocational and academic program in the institution and fewer than the minimum of 100 books representing high interest/low level reading books. There are fewer than 250 multi-ethnic titles. (Repeated from 2007)**

#18 *Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation? Does this include any new books purchased through Recidivism Reduction Strategies funding?* **The institution has 4700 inmates. The four libraries have about 8,000 titles which is fewer than number mandated by California Department of Corrections and Rehabilitation. A separate check-out file maintained on Recidivism Reduction Strategies funded books. (Repeated from 2007)**

#20 *Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter? Can inmates request books that are not in the library collection?* **The undated book catalog of Facility A contained author, title, fiction or non-fiction but no subjects. This is not an adequate catalog system. Other libraries have catalogs that are broken into genres (subjects.) There is no system set up for this process for requesting books; there is no Inter-Library Loan. Requests from inmates are not maintained formally. However, requests are incorporated into to buy lists. (Repeated from 2007)**

#27 *Are adequate supplies available to process library materials, and are there standardized forms for library procedures that are used by all the libraries in the institution?* **There are inadequate supplies available to process library materials and there are no standardized forms for library procedures that are used by all the libraries in the institution. A unified system of cataloging with all necessary supplies is recommended.**

#28 *Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes?* **Training is mainly informal and as needed. Each inmate employee has a manila folder but there is seldom an employee job description included or any record of regular training.**

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
FEDERAL GRANT PROGRAMS SECTION

V. FEDERAL PROGRAMS:

87% COMPLIANCE

Workforce Investment Act Program:

Deficiency:

No Deficiency noted.

COMMENTS ON THE WORKFORCE INVESTMENT ACT PROGRAM

KVSP needs to establish a Workforce Investment Act Inventory List for all hardware purchases. The equipment must be identified with the WIA tag number, institution tag number and equipment serial numbers.

Elementary and Secondary Education Act Program

Deficiency:

#15 Are at least 90% of the California Department of Corrections and Rehabilitation Form 128Es, classroom records and accountability documents current, accurate and secured? *Test of Adult Basic Education scores are not available.*

#16 Do you have current students' Test of Adult Basic Education scores? If not, do you refer the students for testing? *Test of Adult Basic Education scores are not available.*

#18 Are you receiving California Adult Student Assessment System Reports; Suggested Next Level Test, Student Profile, and Student Performance by Do you use any other student assessment to assist student placement? Competency reports? *Comprehensive Adult Student Assessment System reports are not being received. (Repeated from 2007)*

#23 Are California Adult Student Assessment System test results and Plato report printouts shared with students and placed in their Elementary and Secondary Education Act classroom file? *Since the teacher is not receiving Comprehensive Adult Student Assessment System reports and due to computer/Associate Information Specialist Analyst issues, she is unable to print PLATO reports. (Repeated from 2007)*

#28 Is the California Adult Student Assessment System Employability Test administered to those receiving transitional services? *The Comprehensive Adult Student Assessment System Employability Test is not being administered. (Repeated from 2007)*

#33 Do you participate in the institution's quarterly Site Literacy Committee meetings? *There is no Site Literacy Committee at the institution.*

EXECUTIVE SUMMARY
Office of Audits and Compliance Educational Compliance Branch
SPECIAL PROGRAMS SECTION

IV. SPECIAL PROGRAMS*:	N/A	COMPLIANCE
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OVERALL COMPLIANCE RATING: 55%.

There are 58 repeated deficiencies since the last compliance review held approximately 15 months ago on September 24-27, 2007.

_____ G. Lynn Hada, Principal	December 12, 2008
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_____ Raul Romero, Associate Superintendent	December 12, 2008
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* Denotes Developmental Disabilities Program (Clark Remedial Plan) and Physical Disabilities Program (Armstrong)

DEPARTMENT OF CORRECTIONS AND REHABILITATION



Education Compliance Branch

COMPLIANCE REVIEW FINDINGS

Kern Valley State Prison

December 8-12, 2008

ADMINISTRATION

G. Lynn Hada

ACADEMIC EDUCATION

Raul Romero, Donna La Rue

VOCATIONAL EDUCATION

Beverly Penland

LIBRARY

Jan Stuter

FEDERAL SUPPLEMENTARY PROGRAMS

Gary Sutherland

Sarita Mehtani

Mark Lechich

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

No.	INSTITUTION:	Kern Valley State Prison (KVSP)	Yes/No or N/A	COMMENTS
	DATE:	December 8-12, 2008		
	COMPLIANCE TEAM:	G. Lynn Hada		
1.	Allotments/Operating Expenses: <ul style="list-style-type: none"> Does the Principal maintain a budget tracking system to monitor the school departments' complete budget? Is there an annual spending plan to determine sub-allotments to programs, expenditures and their balance? 		Yes	
2.	Based upon current policy (amount of budget allotted) does it appear that a viable spending plan is in place in order for allocated funds to be fully utilized by year end?		Yes	
3.	Are funds allocated by Office of Correctional Education available and spent within program areas?		Yes	Funds were just recently allocated on December 8, 2008.
4.	Are funds tracked by funding source? General Fund, special Budget Change Proposal funding, Federal and State Grant Programs allocated by Office of Correctional Education?		Yes	
5.	Are allocated funds for the Bridging Education Programs, including Arts In Corrections (AIC), used to provide program services to inmates?		N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

6.	Are law library purchases funded by the institution's general budget?	Yes	This item is no longer applicable to the institution. It has been moved to a higher level. The following statement indicates that Office of Correctional Education is attempting to get the Law Library designated funds moved to Program 45 and the California Department of Corrections and Rehabilitation Agency Secretary has been briefed on the problem. The Office of Correctional Education Superintendent on July 3, 2008 provided the following written statement and Budget Change Letter #3 spreadsheet via an email; <i>"Here is the distribution to the field for funding for both the 06/07 and 07/08 Gilmore collection. We have already processed the 08/09 purchases out of our office and they are currently in Procurement. As the 08/09 budget has not been signed we don't have initial 08/09 allotment to the field. The funding in this BC3 is from Program 45 —not the institution Program 25 funds. The Financial Information Memorandum permanently moving Library to education in 2006 is still valid. Due to lack of designated funds we have flagged this to Office of Attorney General and Office of Court Compliance. Furthermore we've briefed Matt Cate and have written a proposal for the funding."</i>
7.	Is the school following the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006 instructions when filling vacancies?	Yes	
8.	Are the Education Monthly Report (EMR) and the Education Daily Report (EDR) accurate and being completed and submitted on a timely basis?	No	The reports are submitted but there are many inaccuracies.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

9.	Has adequate space and equipment been provided for staff to perform the required duties of the Reception Center/Bridging Education Program, Arts In Corrections program and the Television Specialist?	Yes	
10.	<div style="border: 1px solid black; padding: 2px;">Credentials:</div> Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned?	No	One supervisor's credential was expired.
11.	Does the assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification?	N/A	
12.	<div style="border: 1px solid black; padding: 2px;">Duty Statements:</div> Are 100% of the staff duty statements on file and applicable to current position?	No	A few of the staff duty statements are missing.
13.	<div style="border: 1px solid black; padding: 2px;">Operational Procedures:</div> Does the institution have an Operational Procedure that addresses the legislative mandates of the Bridging Education Program?	N/A	
14.	Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion?	No	The current KVSP Education Operational Procedure does not use Department Operation Manual Chapter 10 as an inclusion.
15.	<div style="border: 1px solid black; padding: 2px;">Staff Assignments:</div> Does the Principal maintain a current and complete list of all authorized positions and their status?	Yes	
16.	Are all staff appropriately working and/or assigned within the education program?	No	Several teachers are on Administrative Leave; the Distance Learning teacher is currently assigned to an Adult Basic Education classroom leaving the Distance Learning position vacant.
17.	Do all staff within the education program report to, and are under the Principal's supervision?	Yes	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

18.	Is the Bridging Education Program Reception Center/General Population/Arts In Corrections fully staffed with supervisory, instructional and ancillary personnel?	N/A	
19.	Are Re-Entry Program instructors, class code 7581, assigned only to the Bridging Education Program (BEP)?	N/A	
20.	When Bridging Education Program vacancy occurs, is it immediately reclassified to class code 2290 Teacher, High School, General Education?	N/A	
21.	Has the Artist Facilitator been officially assigned to the Education Department?	N/A	
22.	Is there a system in place that is being utilized to ensure the tracking of inmates and their completed assignments during their transition from the Reception Center to the General Population Institution?	Yes	
23.	Has an individual been designated to be responsible for trouble-shooting the equipment and contacting Transforming Lives Network for needed support?	Yes	
24.	When there is a modified program, class closure, etc., is a plan in place to continue to deliver education services and other required educational activities and is the plan always implemented?	Yes	
25.	Is the Assessment Office Assistant (OA) performing duties delineated in the Assessment OA duty statement?	N/A	
26.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Alternative Education Delivery Model (AEDM): </div> Is an approved Alternative Education Delivery Model Operational Procedure in place?	No	There is a half-time Education/Substance Abuse Program class in operation which an Education/Work model class that is not approved by the May 2008 Alternative Education Delivery Model Operational Procedure CCPOA Agreement.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

27.	Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure per the Suzan Hubbard memo dated May 5, 2005?	Yes	
28.	Are all Alternative Education Delivery Model positions filled?	No	There is no Distance Learning teacher.
29.	Do all Alternative Education Delivery Model faculties have the approved Alternative Education Delivery Model Duty Statement with required signatures?	Yes	
30.	Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?	No	There are no clear criteria for enrollments/assignments at KVSP.
31.	<ul style="list-style-type: none"> Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted? 	No	The classes are not meeting the required assignment quotas, some classes are as much as fifty percent under-enrolled per the Education Monthly Report for October 2008.
32.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> Has all education staff received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration?	N/A	
33.	Are female inmates' vocational assignments being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines?	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

34.	Certificates of Completion or Achievement: <ul style="list-style-type: none"> • Are Certificates of Vocational or Academic Completion being issued to those students earning them and recorded on a tracking system? • Are Certificates of Achievement issued to those students who exit the program before the Certification of Completion is earned? 	No	Many teachers are not issuing the proper certificates; a few teachers are issuing them correctly. There is a tracking system in place. It is recommended that training be provided to the teachers.
35.	Executive/Supervisory Assignments: Are documented staff meetings held regularly by Principal, Academic Vice Principal (AVP), and Vocational Vice Principal (VVP)? (monthly or more)	No	The last documented staff meetings minutes available are dated December 7, 2007.
36.	Is the Principal a member of the Warden's Executive Staff?	Yes	
37.	Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis?	No	There are no logs or other documentation maintained in the education office documenting supervisory staff classroom visitations and observations on a quarterly basis.
38.	<ul style="list-style-type: none"> • Does the Academic Vice-Principal/Vocational Vice-Principal provide documented In-Service-Training and On-the-Job-Training? • Are all probationary and annual performance evaluations currently due completed? 	No	Most performance evaluations are past due.
39.	Are supervisors documenting contact with staff and inmates involved in the bridging program?	N/A	
40.	Are Transforming Lives Network quarterly reports being submitted to Office of Correctional Education by the due dates of Oct. 10, January 10, April 10 and July 10?	No	The October Transforming Lives Network quarterly report has not been submitted.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

41.	<div style="border: 1px solid black; padding: 2px;">Test of Adult Basic Education:</div> <ul style="list-style-type: none"> Is the Principal trouble shooting Test of Adult Basic Education score losses identified on the School Program Assessment Report Card (SPARC)? Is the principal implementing remedial changes to improve the scores? 	No	Remedial changes to improve the scores have not been implemented by the principal.
42.	Is there a 4.0 reading level report generated and distributed to appropriate staff?	Yes	
43.	Is a list of inmates who have a verified Learning Disability generated and distributed to appropriate staff?	No	There is no Learning Disability list generated or distributed to appropriate staff.
44.	<div style="border: 1px solid black; padding: 2px;">Accreditation:</div> <p>Has the education program been accredited by Western Association of Schools and Colleges, or has the application for accreditation been submitted to Western Association of Schools and Colleges?</p>	No	The school has never been accredited. The education program not been accredited by Western Association of Schools and Colleges school since it opened several years ago. It is recommended that accreditation be prioritized to be completed as soon as possible. All accreditation steps taken should be fully documented. KVSP has the only education program in CDCR that is not accredited.
45.	<ul style="list-style-type: none"> Is there a continuing Western Association of Schools and Colleges process being followed by the school with the action plans being actively addressed in a timely manner? Is there a leadership team in place and do minutes substantiate regular meetings? 	No	There is a leadership team in place but there were no meeting minutes available.
46.	<div style="border: 1px solid black; padding: 2px;">Inmate Enrollment/Attendance:</div> <p>Do Academic, Vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?</p>	No	All classes are not meeting the required program enrollment quotas. Some classes are only 50% full per the October Education Monthly Report.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

47.	Has the Institution developed an eligibility list for assigning inmates to the Bridging Education Program?	N/A	
48.	Does the Principal maintain a copy of the current inmate assignment waiting list?	Yes	
49.	Is education staff attending Institution Classification Committee (ICC) meetings for input into the placement of inmates into education programs?	Yes	
50.	<div style="border: 1px solid black; padding: 2px;">Bridging Program:</div> Has the teaching staff met with each inmate upon assignment to the Bridging Education Program?	N/A	
51.	Are all Bridging Education Program eligible inmates receiving an education orientation packet upon arrival to the housing unit?	N/A	
52.	<div style="border: 1px solid black; padding: 2px;">Transforming Lives Network (TLN):</div> Has the Transforming Lives Network satellite dish been installed and operational?	Yes	
53.	Is the Literacy Coordinator (Academic Vice-Principal) designated as the Transforming Lives Network Coordinator?	No	No one has been designated as the Transforming Lives Network coordinator.
54.	Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to Office of Correctional Education?	No	There are no Transforming Lives Network reports.
55.	Has Transforming Lives Network enrollment and completion data been tracked?	No	There are no Transforming Lives Network reports.
56.	<div style="border: 1px solid black; padding: 2px;">GED Testing/High School Credit:</div> <ul style="list-style-type: none"> Is there a High School credit program and General Educational Development (GED) Testing program that follows Office of Correctional Education and State requirements? Are High School Diplomas and GED Equivalency Certificates issued to qualified inmates? 	No	KVSP is not currently testing for General Education Development and there is no High School program. It is recommended that the GED Testing be prioritized since it is a critical accountability item in performance measurements under AB 900 requirements.

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

57.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Inmate Education Advisory Committee:</div> <p>Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings?</p>	No	There is no Inmate Education Advisory Committee established with regularly scheduled monthly meetings. The vocational programs do hold Inmate Education Advisory Committee meetings but not in all yards. The academic programs do not hold any meetings.
58.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Education Files</div> <ul style="list-style-type: none"> Do all of the quarterly California Department of Corrections and Rehabilitation Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions, etc.? Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available.) Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports? 	No	Test of Adult Basic Education scores are not consistently recorded on the California Department of Corrections and Rehabilitation Form 154 cards. There are no credits earned being recorded.
59.	<ul style="list-style-type: none"> Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) transferred to Central Records when a student leaves education, transfers or paroles? Is there a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154 or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the Reception Center and are they then transferred to the General Population receiving institution? 	No	No copies of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) are kept.
60.	If there are any contracted, Office of Correctional Education sponsored or special programs operating at the institution, have the teachers assigned to these programs received special/related training?	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

61.	<div style="border: 1px solid black; padding: 2px;">Literacy:</div> <p>Are literacy programs available to at least 60% of the eligible prison population?</p>	No	Per the October 2008 Education Monthly Report, only a small percentage of the eligible population has literacy programs available to them. It is recommended that activities to implement meeting the Penal Code 2053.1 literacy requirement be prioritized.
62.	Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal?	No	There is no Site Literacy Committee at KVSP.
63.	Does the Site Literacy Committee discuss the Bridging Education Program as part of its quarterly meetings?	N/A	
64.	Is the institution utilizing at least two alternate resources to implement literacy services for inmates?	No	There is only one peer tutoring class as an alternate literacy resource and the October Education Monthly Report notes only 12 participants.
65.	Is there an established procedure for placing students into any existing Learning Literacy (LLL) lab? (a federally or non-federally funded Computer Aided Instruction /Plato/Computer Lab)	No	Computers have been purchased and available for some time to start a Literacy Learning Lab but they are still in the receiving warehouse. It is recommended that the computers be set up as soon as possible since the hardware and software will become outdated if not installed soon.
66.	<div style="border: 1px solid black; padding: 2px;">Developmental Disability Program and Disability Placement Program:</div> <p>If this is a Developmental Disability Program and/or a Disability Placement Program site, does the principal have the required documentation that demonstrates adherence to the Court Remedial Plans and California Department of Corrections and Rehabilitation/Office of Correctional Education policies?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

67.	ESTELLE/Behavior Modification Programs: Is documentation available regarding the original operational intent/concept of the Estelle/Behavior Modification Unit Program and are there actual implementations of the program/programs?	N/A	
68.	Is there an Estelle/Behavior Modification Unit Program monitoring and tracking process in place to record student progress through achievement/progress, data collection, instructional methods, and curriculum?	N/A	
69.	Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment: Is there an approved Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operational Procedure (OP)?	N/A	
70.	Are all Recidivism and Reduction Strategy (RRS) Assessment positions filled (part of Correctional Offender Management Profiling for Alternative Sanctions)?	N/A	
71.	Are all other designated assessment positions filled? Is there a designated supervisor over the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A	
72.	Do all designated assessment staff have an individual Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) log-on code? Is the security of the code maintained?	N/A	
73.	Does the assessment staff maintain appropriate security of laptop and/or stand-alone computers utilized for the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

74.	Recidivism Reduction Strategies: <ul style="list-style-type: none"> Is there a Recidivism Reduction Strategies expenditure tracking log maintained by the Principal for the purposes of identifying equipment or materials purchase or provided to the institution for assessments as identified in the Recidivism Reduction Strategies Budget Change Proposal (BCP)? Are inventories of Recidivism Reduction Strategies equipment maintained and current? 	N/A	
75.	Recidivism Reduction Strategies Enhanced Outpatient Program: Are all Enhanced Outpatient Program staff hired and in place?	N/A	
76.	Does the Principal (via the Academic Vice-Principal) supervise the Enhanced Outpatient Program Teacher(s) in accordance with California Department of Corrections and Rehabilitation policy?	N/A	
77.	Have the Enhanced Outpatient Program Teacher(s) received training in performing the required duties as described in the Enhanced Outpatient Program Duty Statement?	N/A	
78.	Multi-Agency Re-entry Program (SB 618): Has the institution interviewed and hired for the Prison Case Manager positions as members of the Multi-Disciplinary team?	N/A	
79.	Are the four vocational programs referenced in Senate Bill 618 in place at the institution?	N/A	
80.	Has a documentation process been established to monitor inmate contact time as well as inmate growth and completion of program?	N/A	
81.	Vocational-Recidivism Reduction Strategies Are all original vocational Recidivism Reduction Strategies (RRS) teacher positions filled and are all classrooms operating?	N/A	

COMPLIANCE REVIEW FINDINGS

EDUCATION ADMINISTRATION SECTION

82.	Are all Recidivism Reduction Strategies vocational classes at full enrollment?	N/A	
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COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

NO.	INSTITUTION: KVSP DATE: December 8-12, 2008 COMPLIANCE TEAM: Raul Romero, Donna La Rue	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;">Student Job Descriptions:</div> <p>Are all of the inmate students' job descriptions accurate, complete, signed, and available?</p>	No	<p>There are several teachers that have been reassigned within the last 90 days whose student files do not contain completed and signed duty statements. The other teachers that have been operating over 90 days or longer did have the appropriate student job descriptions.</p>
2.	<div style="border: 1px solid black; padding: 2px;">Student Records/Achievements:</div> <p>Do all the of classroom files reflect Test of Adult Basic Education scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan criteria and Office of Correctional Education Test of Adult Basic Education testing requirements?</p>	No	<p>The Test of Adult Basic Education Test Coordinator has been on extended Jury Duty and since the teachers are dependent on him for coordinating the Test of Adult Basic Education testing process, there are student files without recent Test of Adult Basic Education Test scores or no test scores at all. There is a teacher recently assigned to assist in the Test of Adult Basic Education testing process while the regular Test of Adult Basic Education Testing Coordinator however it appears that he has not been able to catch up on testing or obtaining Test of Adult Basic Education Test scores for all students.</p>
3.	<p>Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</p>	No	<p>There are some teachers that do not maintain copies of the California Department of Corrections and Rehabilitation Form128-E in the student files.</p>
4.	<p>Is 100% of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current?</p>	No	<p>Some teachers did not have 100% of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current. One reason is that many teachers just recently received the required standardized textbooks that were in storage at KVSP.</p>

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

5.	Do 100% of the Permanent Class Record Cards (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes?	No	There appears to be inaccurate X/S Time recording. This area needs further local review. One example is that of one teacher reporting that a supervisor told her not to report S Time when students are late and that she should note the time on the PCR with an Xs designation that is inappropriate and not within Work Incentive Title 15 Regulations for time reporting.
6.	Are Certificates of Completion or Achievement being issued to those students earning them?	No	There are several teachers who do not know the requirements for issuing certificates of completion and certificates of accomplishment. It is recommended that all teachers be given a copy of the Office of Correctional Education certificates policy memo. It is further recommended that written verification be maintained for each teacher as proof of practice that they received a copy of the memo.
7.	<div style="border: 1px solid black; padding: 2px;">Instructional Expectations:</div> Do all of the academic education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation approved curriculum?	No	Some teachers have lesson plans that do not agree with the California Department of Corrections and Rehabilitation approved curriculum. Lack of textbooks and materials contributes to this problem especially in classrooms with multi-level students.
8.	Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?	No	No academic or vocational credits are issued for any completed student work or course completions.
9.	Do all of the academic education classes have course outlines that agree with the California Department of Corrections and Rehabilitation approved curriculum?	No	Only one of the teachers interviewed has a course outline.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

10.	Bridging Education Program Instructional Expectations: Is each teacher utilizing the established curriculum for Bridging Education Program and does each teacher have a copy of the curriculum?	N/A	However, the Offender Information Services Inmate Work and Training Incentive Program Report indicates that there are 9 Bridging eligible inmates at KVSP that should be in a work or education assignment.
11.	Are the Test of Adult Basic Education and Comprehensive Adult Student Assessment System being Administered to Bridging Students? Are other assessments being used to assess the inmate job skills?	N/A	
12.	Does Bridging Education Program teacher utilize the proper Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) and is it up to date and accurate?	N/A	
13.	Has the Bridging Education Program teacher developed a written weekly schedule to include student programs and contacts?	N/A	
14.	Test of Adult Basic Education Testing Coordinator: Are gain/loss reports (School Progress Assessment Report Card) and the Test of Adult Basic Education sub-test reports reviewed/shared with the education supervisors?	Yes	
15.	Do the Test of Adult Basic Education Coordinator and at least two others have access to a California Department of Corrections and Rehabilitation email address and user account?	Yes	
16.	Does the Test of Adult Basic Education Coordinator have the most recent Test of Adult Basic Education database (within a week)?	Yes	
17.	Are Test of Adult Basic Education testing protocols signed by current staff?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

18.	Are the Test of Adult Basic Education testing materials secured in a locked cabinet (mandatory standards)?	Yes	
19.	Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator?	No	The test coordinator does not have a computerized master inventory of the test books or answer sheets. There is a manual inventory of the test booklets only. There is no inventory of the answer sheets. It is recommended that the test coordinator find the current count of the answer sheets and then subtract the number used each time answer sheets are issued or used to keep a running balance of answer sheets on hand for inventory accountability.
20.	Is the Test of Adult Basic Education binder current and up-to-date with memos, purchase orders and instructions?	Yes	
21.	Is the Test of Adult Basic Education locator test being used when needed to determine which level-appropriate Test of Adult Basic Education test to administer?	Yes	
22.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Teacher-Test of Adult Basic Education Testing</div> Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?	No	Most teachers report that they can get a Test of Adult Basic Education score for an inmate most of the time within 10 days. Other teachers report that it takes longer. The Office of Correctional Education December 2, 2008, Test of Adult Basic Education score distribution report indicates that 21.0% of the institution's inmates are not tested.
23.	Are the Test of Adult Basic Education tests administered according to the testing matrix?	No	The Office of Correctional Education December 2, 2008, Test of Adult Basic Education score distribution report indicates that 21.0% of the institution's inmates are not tested.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

24.	Is the Test of Adult Basic Education locator being used, when needed, to determine which level-appropriate Test of Adult Basic Education test to administer?	Yes	
25.	Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	No	Some teachers are not using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates. It is recommended that all academic and vocational teachers receive training in this area.
26.	Are teachers using the Test of Adult Basic Education pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes?	No	Some teachers are not using the Test of Adult Basic Education pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes. It is recommended that all academic and vocational teachers receive training in this area.
27.	Are current Test of Adult Basic Education subtests placed in student's classroom file?	No	Some teachers are not placing the current Test of Adult Basic Education subtests in all students' classroom files.
28.	<div style="border: 1px solid black; padding: 2px;">Alternative Education Delivery Models:</div> Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours?	No	There is no evidence that Alternative Education Delivery Model Open Line schedules with dates and times are posted in public areas for inmate access to educational services during off-work hours.
29.	Is the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments?	No	There is no evidence that the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

30.	Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning teacher, utilizing Transforming Lives Network and airing educational programs, such as Kentucky Educational TV General Education Development series on a weekly basis?	No	There is no evidence that the Television Specialist plans, supplements and implements electronic educational coursework with the Distance Learning teacher, utilizing Transforming Lives Network and airing educational programs, such as Kentucky Educational TV General Education Development series on a weekly basis.
31.	Are teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs?	No	There is no evidence that all Alternative Education Delivery Model teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs. It is recommended that a tracking system be developed so that education supervisors can track certificates issued by each teacher.
32.	Do all of the Education/Independent Study (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	Yes	The Education/Independent Study (half-time) class does have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum. However, he needs more textbooks and testing materials especially Comprehensive Adult Student Assessment System testing materials.
33.	Do all of the Education/Work Program (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	No	The Education/Work Program (half-time) class was just reactivated again. The Education/Work Program (half-time) class does not have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

34.	Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	No	The Distance Learning classes do not have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum. The one teacher that handled Distance Learning was moved to the Substance Abuse Program/Education class. Also at least one teacher is acting as a full time college coordinator. This is contrary to California Department of Corrections and Rehabilitation/Division of Education, Vocations and Offender Programs/Office of Correctional Education current funding guidelines. There are no California Department of Corrections and Rehabilitation general funds allocated for funding teacher positions to coordinate college programs or funds for college materials/textbooks. There are teachers being reassigned to various areas at this time and thus stable assignments have not been completed which has created some accountability problems.
35.	Do all of the Independent Study classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	No	All of the Independent Study classes do not have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum. Teachers have just recently started receiving required curriculum textbooks. Teachers need more books.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

36.	<ul style="list-style-type: none"> Are teachers testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model program? Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? 	No	Students are not uniformly being tested on the Test of Adult Basic Education Test or the Comprehensive Adult Student Assessment System Test. KVSP has extremely low Comprehensive Adult Student Assessment System Post-Test Pay Points. It is recommended that the Comprehensive Adult Student Assessment System testing process implementation be prioritized since it is a critical measurement under the AB 900 performance accountability requirements.
37.	<ul style="list-style-type: none"> Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? 	No	There is no evidence that the Alternative Education Delivery Model current enrolled/assigned inmate roster is given to the Vice-Principal and Principal on at least a weekly basis.
38.	Are students' gains being recorded and tracked?	No	One Alternate Education Delivery Model teacher does not have any evidence that student gains being recorded and tracked. Another keeps records but is having problems receiving Comprehensive Adult Student Assessment System testing materials
39.	<div style="border: 1px solid black; padding: 2px;">Gender Responsive Strategies:</div> <p>Do all of the academic life skills classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies (GRS) approved curriculum, i.e.? Women's Conflict and Anger Lifelong Management (W-CALM) (Feb. 2007), Women's Health (July 2007), Women's Parenting (January 2008) Women's Victims (July 2008)?</p>	N/A	
40.	Do all of the academic life skills classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

41.	ESTELLE and Behavior Modification Unit programs: Is there an effective system in place to track monthly attendance, reporting, and evaluation of assigned inmates, their performance; and participation that allows a clear over-all rating of progress of each student in the Behavior Modification Unit/ESTELLE program?	N/A	
42.	Is there a tracking and evaluation process to determine inmate progress on the Behavior Modification Unit curriculum competencies including Conflict and Anger Lifelong Management and is documentation provided to the Unit Classification Committee every 30 days detailing how the inmates assigned to the Behavior Modification Unit program are performing?	N/A	
43.	<ul style="list-style-type: none"> Do ESTELLE students have access to computers as required in the framework of the program for training? Does the teacher have Test of Adult Basic Education scores on all of the students in the program? 	N/A	
44.	Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment: Are assessment teachers conducting assessments on eligible inmates as defined by the current Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Operations Manual?	N/A	
45.	Does assessment staff utilize the current standardized Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Tracking Form?	N/A	
46.	Are the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) questionnaires shredded daily in accordance with the confidential document procedure?	N/A	
47.	Are assessment interviews conducted in a semi-private environment?	N/A	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

48.	Is appropriate assistance provided to inmates during participation in the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment interview in accordance with departmental policies regarding Effective Communication, the Clark Remedial Plan, and Armstrong mandates?	N/A	
49.	<div style="border: 1px solid black; padding: 2px;">Security and Order:</div> Are personal alarms issued to teachers and do they wear whistles and the personal alarms on their person?	Yes	
50.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	No	One newly activated classroom in D Facility did not have an Exit sign or clear evacuation plans.
51.	<div style="border: 1px solid black; padding: 2px;">Pre-Release</div> Does the Pre-Release curriculum contain Life Skills; Communication Skills; Attitude and Self-Esteem; Money Management; Community Resources; Job Application Training; Department of Motor Vehicles Practice Test; and Parole Services?	Yes	The Pre-Release class is located in E Facility (Minimum) and operates a week session with a capacity of 27 students.
52.	Do all of the Pre Release lesson plans contain the objective, handouts, and methods for student evaluation?	Yes	
53.	Is the Pre-Release teacher receiving appropriate institutional and Parole and Community Services Division (P&CSD) staff support?	Yes	
54.	Is the Pre-Release curriculum recording system in-use, accurate, and current and are copies of monthly records maintained?	Yes	
55.	Does the Pre-Release instructor use a variety of teaching methodologies and allow for differentiation of instruction to meet individual learners' needs?	Yes	
56.	Is the Pre-Release class a full-time program (four days/8.5 hours or five days/6.5 hours)? If no, is there an exemption on file?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

57.	Are all of California Department of Corrections and Rehabilitation Form 128Es (that are used to record all education participation including course completions) and classroom records current and accurate and reflect a full-quota student enrollment?	Yes	
58.	Does the Pre-release Teacher use the Framework for Breaking Barriers?	Yes	
59.	Does the Pre-release teacher provide the Office of Correctional Education with monthly Pre-release Program reports on time and maintain copies of those monthly Pre-release program reports?	Yes	
60.	<div style="border: 1px solid black; padding: 2px;">Recidivism Reduction Strategies Enhanced Outpatient Program:</div> Is the Enhanced Outpatient Program Teacher a participating member of the Interdisciplinary Treatment Team (IDTT) meetings?	N/A	
61.	Is there a current roster of Enhanced Outpatient Program inmates determined eligible by Interdisciplinary Treatment Team (IDTT) and the Enhanced Outpatient Program teacher to receive education services?	N/A	
62.	Is the required student assessment for development of the Individualized Treatment and Education Plan completed in accordance with the Enhanced Outpatient Program assessment guidelines timelines?	N/A	
63.	Is there documentation of the education services provided to Enhanced Outpatient Program inmates?	N/A	
64.	<div style="border: 1px solid black; padding: 2px;">Transforming Lives Network Program:</div> Are alternate modalities available for use within the housing units for the Distance Learning program? For example, video, Transforming Lives Network, institutional television, visual worksheets, etc.?	No	There is no evidence to support any Transforming Lives Network activities. The satellite is working but other than the Physical Education Teacher reporting using an institutional TV channel, there are no other activities reported by teachers. There is no documented evidence that inmates are participating in any Transforming Lives Network activities.

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

65.	Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?	No	There is no evidence to support any Transforming Lives Network activities. The satellite is working but other than the Physical Education Teacher reporting using an institutional TV channel, there are no other activities reported by teachers. There is no documented evidence that inmates are participating in any Transforming Lives Network activities.
66.	Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty?	No	There is no evidence to support any Transforming Lives Network activities. The satellite is working but other than the Physical Education Teacher reporting using an institutional TV channel, there are no other activities reported by teachers. There is no documented evidence that inmates are participating in any Transforming Lives Network activities.
67.	Are school faculty members given the opportunity to provide input into the broadcast schedule?	No	There is no evidence to support any Transforming Lives Network activities. The satellite is working but other than the Physical Education Teacher reporting using an institutional TV channel, there are no other activities reported by teachers. There is no documented evidence that inmates are participating in any Transforming Lives Network activities.
68.	<div style="border: 1px solid black; padding: 2px;">Recreation/Physical Education (P.E.):</div> Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program?	Yes	
69.	Does the Physical Education teacher follow the California Department of Corrections and Rehabilitation approved selection process for movies?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

70.	Does the Physical Education teacher have sign-up sheets, team rosters, or other evidence of inmate participation in sports and health education activities?	Yes	
71.	Is California Department of Corrections and Rehabilitation-approved State frameworks curriculum being used and are course outlines present?	No	Fitness for Life packets are used. The Office of Correctional Education has not approved the Fitness for Life curriculum for use by Physical Education (PE) Teachers.
72.	Are health education, physical fitness training and recreational activities being provided to the Special Needs populations?	No	Health education is not taught by the Physical Education Teacher. The Physical Education Teacher does provide table and card games to the elderly senior population. Physical fitness activities for the elderly senior population are provided at the minimum facility. It is recommended that the Physical Education Teacher provide sign up sheets for low impact aerobic exercises as well as health related mini-lessons on health, nutrition, special exercises and the quality of life impact created by the aging process for the elderly senior population.
73.	Does the Physical Education teacher have a system in place to ensure accountability for state property including sports equipment, clothing and supplies?	Yes	
74.	Are there sufficient supplies, such as board games and sports equipment, to ensure a viable Physical Education program?	Yes	
75.	Are time-keeping records (California Department of Corrections and Rehabilitation Form 1697) on inmates assigned to work for the Physical Education teacher being kept?	Yes	

COMPLIANCE REVIEW FINDINGS

ACADEMIC EDUCATION SECTION

76.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Recidivism Reduction Strategies (Physical Education):</div> <p>Are health education, physical fitness training and recreational activities being provided to the geriatric population (age 55 and over)?</p>	Yes	
77.	<p>Have the funds for the Recidivism Reduction Strategies funds for the geriatric population been expended for the geriatric population?</p>	No	<p>The Physical Education Teacher has not received Fiscal Year 2008-2009 Recidivism Reduction Strategies funds.</p>

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

NO	INSTITUTION: KVSP DATE: December 8-12, 2008 COMPLIANCE TEAM: Beverly Penland	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;">Student Job Description:</div> <p>Are all of the inmate students' job descriptions accurate, complete, signed, and available?</p>	Yes	
2.	<div style="border: 1px solid black; padding: 2px;">Student Records/Achievements:</div> <p>Do all of classroom files reflect Test of Adult Basic Education scores that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan and Office of Correctional Education Test of Adult Basic Education testing criteria?</p>	No	Most of the student files reviewed did not have a Test of Adult Basic Education test score in the file. Some files had the Test of Adult Basic Education subtest in the files and a few had a California Department of Corrections Rehabilitation Form 128B chronological report listing the test scores.
3.	Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?	Yes	
4.	Is the curriculum recording system in-use, accurate, and current?	Yes	
5.	Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time (on full days) for 4-10 programs?	No	The teachers are unable to reflect the minimum student contact time of 6.5 hours of "X" time on the Permanent Class Record Card. The teachers are appropriately giving "S" time when student are not in their programs. The teachers indicated that, due to late release times from some housing units, the students arrive at education late. Also, when officers are redirected classes are released early.
6.	Are elective credits in the designated vocational subject being issued to students and recorded on their transcript in the education file?	No	None of the teachers are issuing or recording elective credits for their students. Some of the teachers indicated they would like to be able to issue credits for successful competitions of program components; but did not know how to proceed.

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

7.	Are Trade/Industry Certifications being issued and recorded to those students earning them?	No	<p>The Office Services and Related Technologies teachers have not received Microsoft certification training, needed to issue the appropriate Microsoft certification. The funding for Microsoft training has been requested from the Department of Education, Vocations and Offender Programs, by the Office of Correctional Education. The welding teacher does not have the necessary equipment and supplies to provide the training for the National Center for Construction Education and Research, as well as, the American Welding Society industry certifications. The auto mechanics program is unable to provide the training to issue the Automotive Service of Excellence certification, due to lack of tools, equipment, and hands-on-training projects. The auto mechanics teacher indicated that his program received donations of two automobiles in June 2008. Also recently a 4 wheel drive pick-up was donated, but he has not been allowed to bring the vehicles into the institution. These would provide the hands-on-training necessary to learn this trade. He has also requested from the Principal to offer Employee Services to the staff, thus providing additional hands-on-training projects for the students. It is recommended that the principal work with the institutional managers to identify and locate the original equipment and supplies ordered and delivered that were paid from the Capital Outlay funds.</p>
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COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

8.	Are Certificates of Completion or Achievement as appropriate being issued and recorded for those students earning them?	No	Some of the teachers were unable to appropriately identify the difference or when the Certificates of Completion and Achievement should be issued and recorded for their students.
9.	<div style="border: 1px solid black; padding: 2px;">Instructional Expectations:</div> Do all of the vocational education classes have course outlines that agree with the California Department of Corrections and Rehabilitation curriculum?	Yes	
10.	Do all of the vocational education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation curriculum?	No	Some of the teachers said they had just received or had not received their books. Consequently, they did not have lesson plans that agreed with the curriculum.
11.	Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?	No	One of the teachers did not have a literacy plan for students with a reading score below 9.0. There was no documentation to verify literacy implementation.
12.	Are Vocational Instructors conducting and documenting at least four hours of approved related formal classroom training each week for all inmate students?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

13.	<p>Are all of the vocational programs that have a nationally recognized certification programs participating in that program?</p>	No	<p>The Office Services and Related Technologies teachers have not received Microsoft certification training to issue Microsoft certifications. The funding for Microsoft training has been requested from the Department of Education, Vocations and Offender Programs, by the Office of Correctional Education. The welding teacher does not have the necessary equipment and supplies to issue the National Center for Construction Education and Research and the American Welding Society industry certifications in welding. The auto mechanics program does not have the equipment and training materials necessary to issue the Automotive Service of Excellence Certifications. It is recommended that the principal work with the institutional managers to identify and locate the original equipment and supplies ordered and delivered that were paid from the Capital Outlay funds. Also, it was recommended to the janitorial and landscape teachers to investigate the possibility of trade industry certifications for their students.</p>
14.	<p>Recidivism Reduction Strategies:</p> <p>Are the Recidivism Reduction Strategies programs issuing trade certifications and/or National Center for Construction Education and Research (NCCER) certifications?</p>	N/A	
15.	<p>National Center for Construction Education and Research:</p> <p>Are all the National Center for Construction Education and Research (NCCER) accreditation guidelines for Standardized Training being used?</p>	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

16.	Are the Building Construction Trades using the Contren Learning Series text books as the primary classroom text book?	Yes	
17.	Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?	No	The welding program has been open for over one year and is still not operational. The teacher is doing an excellent job under very adverse conditions. The limited equipment in the program is still not connected or operational. Welding booths need to be constructed and there are very limited welding supplies. It is recommended that the principal work with the institutional managers to identify and locate the original equipment and supplies ordered and delivered that were paid from the Capital Outlay funds for the welding program. The teacher has submitted a list of equipment to the Principal, which is needed to provide training. The earning of industry certification is a key element in providing the inmates with the necessary tools for reentry into society upon parole.
18.	Are all of the building trade instructors currently National Center for Construction Education and Research Certified Instructors and have attended the Instructor Certification Training Program (ICTP)?	Yes	
19.	Are all of the craft instructors maintaining and conducting record keeping as outlined in the National Center for Construction Education and Research Accreditation Guidelines?	Yes	
20.	Are all of the instructors maintaining the confidentiality and maintain restricted access to inmate social security numbers used on the National Center for Construction Education and Research Form 200's?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

21.	Are all of the written National Center for Construction Education and Research tests, National Center for Construction Education and Research test CD-ROMs and National Center for Construction Education and Research answer keys maintained in a secure locked location with an inventory of the tests on hand?	Yes	
22.	Are all of the students evaluated based on a 70% minimum passing score on National Center for Construction Education and Research written examinations?	Yes	
23.	Are those students that fail a National Center for Construction Education and Research written test or practical exam required to wait a minimum of 48 hours prior to being retested?	Yes	
24.	Are 90% or more of the students completing the first six National Center for Construction Education and Research CORE Modules prior to starting the Level 1 for the trade?	Yes	The students are completing the National Center for Construction Education and Research CORE modules before starting the Level I of the trade. However, the welding program needs to have equipment and supplies available for students to begin the Level I section of the welding trade.
25.	Are all National Center for Construction Education and Research performance evaluations conducted for each module and a record of the Performance Profile Sheet maintained?	Yes	
26.	Upon successful completion of the National Center for Construction Education and Research written and performance evaluation, is the instructor documenting and submitting the Form 200 to the Unit Training Representative (UTR) for signature and forwarding to Office of Correctional Education within 60 days?	Yes	The welding teacher has a large group of students who have completed the CORE components, which are being submitted for National Center for construction Education and Research CORE certifications.
27.	Are all of the instructors accepting National Center for Construction Education and Research Modules and Completion Certifications issued prior to students being assigned to the vocational class?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

28.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Test of Adult Basic Education Testing</div> <p>Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?</p>	No	<p>The teachers indicated that they try to meet the 10 day initial time frame for the Test of Adult Basic Education. Many of the student files did not have test scores to verify that the test time line requirement was being met. It is recommended that if there is a delay in testing, the reason be documented in the student's file.</p>
29.	<p>Are the Test of Adult Basic Education tests administered according to the testing matrix?</p>	No	<p>Most of the teachers indicated they were aware of the testing matrix. Some of the student files indicated that the test matrix was not being followed. It is recommended that training be provided to the teachers, on how and when to administer the Test of Adult Basic Education.</p>
30.	<p>Is the Test of Adult Basic Education locator being used, when needed, to determine which level appropriate Test of Adult Basic Education test to administer?</p>	No	<p>Some of the teachers were not aware that the Test of Adult Basic Education locator test is available and when it is appropriate to administer when testing the students.</p>
31.	<p>Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?</p>	No	<p>Not all the students files checked contained the Test of Adult Basic Education subtests. Some teachers stated that when they received the subtests they did review the results with the students. It is recommended that the teacher receive training on the subtests and have the student sign the subtest, documenting that the review took place.</p>
32.	<p>Are teachers using the Test of Adult Basic Education test results as a diagnostic tool for individualized instruction and trouble shooting Test of Adult Basic Education score losses in their classes?</p>	No	<p>Not all the files checked had the Test of Adult Basic Education subtests in the student file. The teachers stated that if they receive the subtest they review the subtest with the students and try and discover the reason for a score loss with the student.</p>

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

33.	Are current Test of Adult Basic Education subtests placed in student's file?	No	Not all the files checked had the Test of Adult Basic Education subtests in the student file. The teachers stated that they do not always receive a subtest from the testing coordinator when the student is tested.
34.	Gender Responsive Strategies: Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill & Cabinet, Cable Technician, etc.?	N/A	
35.	Do all or more of the vocational classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	
36.	Security and Order: Are personal alarms issued by institution to instructors and do they wear a whistle and the personal alarms on their person?	Yes	
37.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
38.	Is there an Inmate Safety Committee that conducts and records weekly safety inspections?	No	One teacher did not have an Inmate Safety Committee established with documentation of weekly safety inspections.
39.	Is at least one hour per month of safety meetings being held and documented?	No	One teacher stated he held periodic safety meeting and had some documentation available. However, the required one hour per month of safety meetings could not be verified.
40.	Trade Advisory Committee: Does the instructor have a documented Trade Advisory Committee that meets at least quarterly?	Yes	

COMPLIANCE REVIEW FINDINGS

VOCATIONAL EDUCATION SECTION

41.	Job Market Analysis: Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file?	Yes	
42.	Apprenticeship: Is there an active Apprenticeship Training Program?	N/A	
43.	If there is an active Apprenticeship Training Program, do inmates meet apprenticeship requirements and receive pay?	N/A	
44.	Does the instructor have a documented active Joint Apprenticeship Committee that meets at least quarterly within the institution?	N/A	
45.	Employee and Community Services Programs. If vocational education programs are participating in Employee Services Programs, are they meeting Department Operation Manual and Penal Code requirements?	N/A	
46.	If vocational education programs are participating in community service projects, are they meeting Department Operation Manual requirements?	N/A	

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

NO	INSTITUTION: KVSP DATE: December 8-12, 2008 COMPLIANCE TEAM: Jan Stuter	Yes/No or N/A	COMMENTS
1.	Library Staffing: <ul style="list-style-type: none"> Does the Principal, Academic Vice-Principal, or Vocational Vice-Principal supervise the library staff? Does the Senior Librarian implement/plan the library program? 	Yes	The Library Technical Assistants and the Senior Librarian report to the Vocational Vice-Principal.
2.	Department Operations Manual and Department Operations Manual Supplement: <ul style="list-style-type: none"> Is the current Department Operations Manual, Section 53060 available in the main libraries and satellite libraries? Is there a Department Operations Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operations Manual supplement reflect the current, actual local library program? 	No	The newest bound Department Operations Manual was available in every library. In Facility A Library, two additional Department Operations Manuals in 3 ring binders end half-way through the Department Operations Manual—should be discarded. The Senior Librarian has written and rewritten a Department Operations Manual Supplement over the years, but it has never been approved. The Department Operations Manual Supplement could not be found in the Department Operations Manual Supplement 3-ring binder.
3.	General Population (GP) Access Hours: <ul style="list-style-type: none"> Are library hours of operation posted where General Population inmates can see them, and do General Population inmates have access to the library during off work hours? Do General Population inmates have regular access to non-legal library services? 	No	Facility A Hours (no days posted) on check-out window only. There is no posting on the library that the Facility A is open 3 days a week. Other libraries post hours on outside of the library. There is window access only on Facility A. Other libraries allow inmates inside if they are not filled with law library users.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

4.	<table><tr><th>General</th><th>Population/Law</th><th>Library</th></tr><tr><td colspan="3">Documentation:</td></tr><tr><td colspan="3"><ul style="list-style-type: none">Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use?Is there a list showing inmates who request legal access, and those who received access?</td></tr></table>	General	Population/Law	Library	Documentation:			<ul style="list-style-type: none">Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use?Is there a list showing inmates who request legal access, and those who received access?			Yes	Documentation is very poor. Paperwork is hard to read; not well organized. There is one log for all users, legal as well as non-legal; one log for Priority Legal Users, all law library requests including those not filled are maintained on forms filed by month. Sign-out times often not filled in by users but by staff. It is strongly advised the computerized records be established.
General	Population/Law	Library										
Documentation:												
<ul style="list-style-type: none">Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use?Is there a list showing inmates who request legal access, and those who received access?												
5.	<table><tr><th>Restricted Housing Status Inmate Access:</th></tr><tr><td><ul style="list-style-type: none">If there are Restricted Housing inmates in the institution, is there a Department Operations Manual supplement relating to their use of the library?Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request?</td></tr></table>	Restricted Housing Status Inmate Access:	<ul style="list-style-type: none">If there are Restricted Housing inmates in the institution, is there a Department Operations Manual supplement relating to their use of the library?Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request?	No	There are none on A Yard. B yard has two Administrative Segregation units and there are two additional Administrative Segregation units on each side of the institution. All Administrative Segregation units have computerized (Legal Library Electronic Data System) law libraries available on their units along with the additional mandated print material. Library staff has provided training for Administrative Segregation staff (CO's). Because of staff turnover, training should be provided at least annually and records checked periodically.							
Restricted Housing Status Inmate Access:												
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6.	<table><tr><th>Restricted Housing Status Non-Legal Library Services:</th></tr><tr><td>Do Restricted Housing inmates receive general library services?</td></tr></table>	Restricted Housing Status Non-Legal Library Services:	Do Restricted Housing inmates receive general library services?	Yes	Restricted Housing inmates receive general library services irregularly. Boxes of library books are provided to all of the Administrative Segregation units. Books may be doubles of library copies or discarded titles.							
Restricted Housing Status Non-Legal Library Services:												
Do Restricted Housing inmates receive general library services?												
7.	<table><tr><th>Library Expenditures:</th></tr><tr><td><ul style="list-style-type: none">Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees?If other items are purchased, are they for library use?</td></tr></table>	Library Expenditures:	<ul style="list-style-type: none">Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees?If other items are purchased, are they for library use?	No	A major problem is that there are no magazines, Inter-Library Loan fees and limited repair supplies. The Senior Librarian's requests for library materials over the last few years have been repeatedly turned down.							
Library Expenditures:												
<ul style="list-style-type: none">Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees?If other items are purchased, are they for library use?												

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

8.	Inmate Welfare Funds (IWF) Expenditure: Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?	Yes	There is one newspaper subscription for each yard.
9.	Law Library Expenditure: <ul style="list-style-type: none"> Does the Senior Librarian understand the process associated with receiving the mandated law discs/books through the warehouse or mail room? Are the Stock Received Reports completed and submitted to the Regional Accounting Office? 	Yes	
10.	<ul style="list-style-type: none"> Are all received mandated law books and discs made available to inmates in a timely manner? Are the discs timely loaded on the Law Library Electronic Data System computer? Are the law books shelved promptly? 	Yes	The discs are timely loaded on the Law Library Electronic Data System computer By the Senior Librarian.
11.	<ul style="list-style-type: none"> Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them? 	No	The Senior Librarian checks in the discs.
12.	Does the librarian know what steps to take if a mandated law library book or disc is not received when it should be?	Yes	
13.	Library Book Stock - Quality, Part I: <ul style="list-style-type: none"> Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than five years?) Does the library program have at least three directories relevant to the questions asked by the population served? 	No	The World Book Encyclopedia is the outdated 2007 edition.
14.	Library Book Stock - Quality, Part II: Does each library in the institution have a current world almanac, an atlas that is no more than three years old, an English language dictionary that is no more than five years old, and a Spanish and English dictionary that is no more than ten years old?	No	The condition of the existing reference materials is fair to poor.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

15.	Library Book Stock - Quality, Part III: <ul style="list-style-type: none"> Does each library regularly inspect the physical condition of their books? Does the library program have a book repair procedure? 	Yes	The books are inspected as they are returned. No special book repair material is used, instead scotch tape is used. Appropriate supplies and a standardized procedure are recommended. Many titles appear in very poor condition.
16.	Library Book Stock - Quality, Educational Support, Literacy, Multi-Ethnicity: <p>Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (including Spanish language) and Native American materials?</p>	No	There are no textbooks for each vocational and academic program in the institution and fewer than the minimum of 100 books representing high interest/low level reading books. There are fewer than 250 multi-ethnic titles.
17.	Library Book Stock - User Orientation: <ul style="list-style-type: none"> Are book collections designed to meet the needs and interests of the inmate population served? Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box? 	Yes	Books collections are designed to meet the inmate needs much as possible. Irregular meetings (minutes are maintained by the Vocational Vice-Principal but not shared with the Senior Librarian.) Suggestion boxes are maintained.
18.	Library Book Stock - Quantity: (Department Operations Manual Book Aug) <ul style="list-style-type: none"> Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation? Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding? 	No	The institution has 4700 inmates. The four libraries have about 8,000 titles which is fewer than number mandated by California Department of Corrections and Rehabilitation. A separate check-out file maintained on Recidivism Reduction Strategies funded books.
19.	Have all books purchased through the Recidivism Reduction Strategies funds been received, shelved, and inmate use tracked?	Yes	As many books have been shelved as received.

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

20.	Book Access: <ul style="list-style-type: none"> Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter? Can inmates request books that are not in the library collection? 	No	The undated book catalog of Facility A contained author, title, fiction or non-fiction but no subjects. This is not an adequate catalog system. Other libraries have catalogs that are broken into genres (subjects.) There is no system set up for this process for requesting books; there is no Inter-Library Loan. Requests from inmates are not maintained formally. However, requests are incorporated into to buy lists.
21.	Circulation: <p>Is there an adequate library book checkout system in place and an adequate overdue system in use?</p>	Yes	There is a manual system; they should consider switching to a computerized system.
22.	Mandated Law Library/California Code of Regulations, Department Operations Manual <ul style="list-style-type: none"> Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operations Manual? Are all the Law Library Electronic Data System computers up-to-date and operating in each library? 	Yes	
23.	Law Library - American Disability Act (ADA): <p>Are American Disability Act mandatory postings present in the library?</p>	Yes	
24.	Circulating Law Library: <p>Is a procedure for accessing the Circulating Law Library in place?</p>	N/A	

COMPLIANCE REVIEW FINDINGS

LIBRARY/LAW LIBRARY SECTION

25.	Court Deadlines: Are court deadlines verified, and is there documentation that inmates with established court deadlines have priority access to the library?	Yes	
26.	Law Library Forms and Supplies: Do inmates have access to court required forms; are required legal supplies adequate and available; are procedures to distribute forms and supplies appropriate; and do all law libraries follow the same law library procedures?	Yes	There are too many forms. It is recommended that all forms that are not supposed to originate from the inmate should be discarded.
27.	General Library Forms and Supplies: Are adequate supplies available to process library materials, and are there standardized forms for library procedures that are used by all the libraries in the institution?	No	There are inadequate supplies available to process library materials and there are no standardized forms for library procedures that are used by all the libraries in the institution. A unified system of cataloging with all necessary supplies is recommended.
28.	Inmate Clerk Training: <ul style="list-style-type: none"> Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes? 	No	Training is mainly informal and as needed. Each inmate employee has a manila folder but there is seldom an employee job description included or any record of regular training.
29.	Security and Order: <ul style="list-style-type: none"> Are personal alarms issued by institution to library staff; does library staff wear a whistle and the issued personal alarms? Are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan? 	Yes	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: KVSP DATE: 12-9-08 COMPLIANCE TEAM: Mark Lechich	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;"> Duty Description/Credentials Learning Lab </div> Statement/Job – Literacy Do you have a current duty statement on file (within one year)?	N/A	KVSP does not have a Phase I/II Literacy Lab.
2.	Do you have a valid credential on file?	N/A	
3.	<div style="border: 1px solid black; padding: 2px;"> Security/Order – Literacy Learning Lab </div> Are personal alarms issued by the institution to teaching staff and worn?	N/A	
4.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	N/A	
5.	<div style="border: 1px solid black; padding: 2px;"> Supervisory/Support – Literacy Learning Lab </div> Do you receive support from your supervisor and other educational staff?	N/A	
6.	Does the Vice Principal visit/observe your class? Does the Principal visit/observe your class? Do you maintain a sign-in log?	N/A	
7.	<div style="border: 1px solid black; padding: 2px;"> Inmate Enrollment – Literacy Learning Lab </div> Do you maintain a minimum enrollment of 27 students?	N/A	
8.	Do students receive direct/group instruction?	N/A	
9.	Is the Literacy Learning Lab a "self contained" program?	N/A	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

10.	Student Records/Testing Achievements – Literacy Learning Lab Do you verify non-General Education Development or non-High School graduation of the student?	N/A	
11.	Do you start a student record file upon the student entering the Literacy Learning Lab program?	N/A	
12.	Does each student have a current Test of Adult Basic Education score? <i>If not, do you refer the student for testing?</i>	N/A	
13.	Do you assess student's basic skill level? <i>Describe</i>	N/A	
14.	Are at least 90% of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and accountability documents current, accurate and secured?	N/A	
15.	Are the Student Files current (incl. Test of Adult Basic Education scores and any other assessment scores)? <i>Review</i>	N/A	
16.	Is there a current Student Job Description on file?	N/A	
17.	Instructional Expectations – Literacy Learning Lab Do you use the approved California Department of Corrections and Rehabilitation Competency Based Adult Basic Education curriculum?	N/A	
18.	Are differentiated instructional methods used? <i>Describe</i>	N/A	
19.	Do students track their own progress?	N/A	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

20.	Do the students receive computer orientation? Is there continuous training? Describe	N/A	
21.	Do you maintain course outlines and lesson plans? Review files	N/A	
22.	Do you use alternative assessment instruments (besides the required Test of Adult Basic Education), to determine a student's instructional plan? Describe	N/A	
23.	Do students spend an average of six months of instructional time enrolled in the program?	N/A	
24.	Other Services – Literacy Learning Lab Do you refer students to other services, i.e. medical? Describe the process	N/A	
25.	Do you provide the students career-related information?	N/A	
26.	Do you have student aides? If so, how many and how are they used?	N/A	
27.	Training – Literacy Learning Lab Have you participated in conferences, workshops and seminars from July 1, 2007–December 31, 2008? If so, provide a list.	N/A	
28.	Expenses – Literacy Learning Lab Are spending levels appropriate for material purchases and training to support program needs?	N/A	
29.	Equipment – Literacy Learning Lab Do you maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? Conduct an inventory	N/A	

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

30.	Is your software appropriately maintained by PLATO's technical field staff? Do you have all three educational software programs (PLATO, Reading Horizons, and Reading Plus) presently in service for your students?	N/A	
31.	Do you register all new software purchases with the Associate Information Systems Analyst?	N/A	
32.	<div>Committees/Meetings – Literacy Learning Lab</div> <p>How often do you meet with the referral teacher for consultation on a student?</p>	N/A	
33.	<div>CASAS/TOPSPRO Management Information System (MIS) Coordinator</div> <p>Have you been trained in the area of California Accountability and the TOPSPRO Management Information System to appropriately perform your duties as a Comprehensive Adult Student Assessment System Coordinator? When was the date of the last training? <i>Dates of last trainings</i></p>	Yes	Mr. Thornton attended the April, 2008 and the October, 2008 TOPSPRO training conducted by the Workforce Investment Act Administrator. He also attended the Comprehensive Adult Student Assessment System Summer Institute in June.
34.	Do you have an adequate amount of Comprehensive Adult Student Assessment System (CASAS) testing materials to implement CASAS? <i>Explain the CASAS testing procedures at your institution.</i>	Yes	KVSP has an adequate amount of testing materials. Sign-Out and Sign-In sheet is used to track test booklets and test records.
35.	Are the Comprehensive Adult Student Assessment System testing materials appropriately inventoried and secured?	Yes	Locked in cabinet in Testing Office.
36.	Are you using the latest version of the TOPSPRO Management Information System software?	Yes	TOPSPRO version 5.0 Build 44.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

37.	Is the hardware equipment (Scantron machine) and software (TOPSpro Management Information System) used to implement Comprehensive Adult Student Assessment System appropriately maintained?	Yes	The computer is in good shape. The scanner works well.
38.	Do you provide each teacher with a Student Performance by Competency Report to assistance them in preparing lesson plans?	Yes	Student Performance by Competency Report for teachers and students. Teacher also receives the Student Gains by Class Report.
39.	Do you know how to generate the California Payment Point Report? Can you generate a Preliminary Payment Point Report?	Yes	Mr. Thornton checks the report. This information assists the Coordinator with data cleaning.
40	Are the appropriate students receiving and completing the Core Performance Surveys? <i>Explain the process in place to ensure that students are receiving the surveys.</i>	Yes	If the ex-student is still at the institution the Comprehensive Adult Student Assessment System Coordinator locates student to complete survey and submit to the Workforce Investment Act Administrator.
41.	Can you generate an up to date list of students that will be receiving the Core Performance Survey for the past quarter?	Yes	First Quarter data showed "No Students Qualified". Comprehensive Adult Student Assessment System Coordinator will locate ex-students to have him fill out survey.
42.	Can you generate a Data Integrity site review?	Yes	Data Integrity Report is used for assisting Coordinator to locate errors in the data. KVSP has 28.7% conservative estimate pretest (diamond).

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

43.	Can you generate a Student Gains by Class Report? Can you produce five student Entry/Update records and Pre/Post Test records? (Check reports with Student Gains by Class Report and Student Lister. Dates, testing books, and scores should match between records)	Yes	This report is given to the teachers to account for the students learning gains. All records matched. I verified information from the TOPSpro software program.
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COMMENTS ABOUT WORKFORCE INVESTMENT ACT SECTION

KVSP needs to establish a Workforce Investment Act Inventory List for all hardware purchases. The equipment must be identified with the WIA tag number, institution tag number and equipment serial numbers.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Elementary and Secondary Education Act (ESEA) Program

No.	INSTITUTION: KVSP DATE: 12-4-08 COMPLIANCE TEAM: Sarita Mehtani	Yes/No OR N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Duty Statement/Job Description/ Credentials</div> Do you have a current duty statement on file (within one year)?	Yes	
2.	Do you have a valid credential on file?	Yes	Expires 2011.
3.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Security/Order</div> Are personal alarms issued by the institution to teaching staff, and worn?	Yes	
4.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
5.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Supervisory/Support</div> Do you receive support from your supervisor and other educational staff?	Yes	
6.	Do you advertise the Title I Program? Describe what methods you use to advertise this program.	Yes	Brochures to Correctional Counselor Is, Ad on institution channel on the Closed Circuit TV.
7.	Does the Vice-Principal or Principal visit/observe your class? How often? Do you maintain a sign-in log?	Yes	Biweekly.
8.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Inmate Enrollment</div> Do you have any involvement with the Inmate Assignment Office? <i>Describe.</i>	Yes	Assignment office provides her an under 21 list every month showing assigned and unassigned inmates.
9.	Do you have students enrolled in your program for academic instruction only? Currently, how many students are receiving only academic instruction?	Yes	6 Students.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Elementary and Secondary Education Act (ESEA) Program

10.	Do you have students enrolled in your program for Transitional Services only? Currently, how many students are receiving only Transitional Services?	Yes	3 Students.
11.	Have enrolled Elementary and Secondary Education Act students read and signed The Attendance and Performance Agreement?	Yes	
12.	Have enrolled Elementary and Secondary Education Act students signed an Inmate Trust Withdrawal covering classroom equipment and supplies?	Yes	
13.	<div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;"> Student Achievements </div> Do you verify General Education Development or High School graduation of the student? If not who does?	Yes	
14.	Do you maintain the student record file and portfolio? When do you begin the development of the student record file and portfolio?	Yes	As soon as student is enrolled.
15.	Are at least 90% of the California Department of Corrections and Rehabilitation Form 128Es, classroom records and accountability documents current, accurate and secured? REVIEW	No	Test of Adult Basic Education scores are not available.
16.	Do you have current students' Test of Adult Basic Education scores? If not, do you refer the students for testing?	No	Test of Adult Basic Education scores are not available.
17.	Is the Plato system used as a supplement to your academic instruction? EXPLAIN	Yes	
18.	Are you receiving California Adult Student Assessment System Reports; Suggested Next Level Test, Student Profile, and Student Performance by Competency reports? Describe	No	Comprehensive Adult Student Assessment System reports are not being received.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Elementary and Secondary Education Act (ESEA) Program

19.	Do you use any other student assessment to assist student placement? Indicate the names of those assessment tools.	Yes	Ms. Toner uses pre writing, Slosson reading and teacher-made tests.
20.	Instructional Expectations Do you Interview each eligible student before placing him in the class?	Yes	
21.	Do you use the approved California Department of Corrections and Rehabilitation Competency-Based Adult Basic Education curriculum?	Yes	
22.	Do you utilize different instructional modalities in your program? Describe	Yes	Computer Assisted Instruction; One-to-One and Small Group Instruction. Audio tapes.
23.	Are California Adult Student Assessment System and Plato report printouts shared with students and placed in their Elementary and Secondary Education Act classroom file?	No	Since the teacher is not receiving Comprehensive Adult Student Assessment System reports and due to computer/Associate Information Specialist Analyst issues, she is unable to print PLATO reports.
24.	Do the students receive computer orientation? If so, who provides this training? Is there continuous training?	Yes	Teacher does it; On-going.
25.	Do you develop an individual course of study for each student? EXPLAIN	Yes	Develops an individual education plan.
26.	Do you have a schedule and a list of assigned students? EXPLAIN	Yes	
27.	Do all the classes utilize the Elementary and Secondary Education Act program services? Name those programs that use the Elementary and Secondary Education Act Program services.	Yes	Distance Learning, Bridging, All Academic and Vocational Programs.
28.	Transitional Services Is the California Adult Student Assessment System Employability Test administered to those receiving transitional services?	No	The Comprehensive Adult Student Assessment System Employability Test is not being administered.

COMPLIANCE REVIEW FINDINGS

FEDERAL GRANTS PROGRAMS SECTION

Elementary and Secondary Education Act (ESEA) Program

29.	Do you provide the students career-related information?	Yes	
30.	<div>Training</div> Have you participated in conferences, workshops and seminars in the current fiscal year? If so, provide a list.	Yes	PLATO Training - Nov. 2008.
31.	<div>Equipment</div> Is your inventory of equipment current? <i>Provide a list.</i>	Yes	
32.	Is equipment tagged with an Improving America's Schools Act/Elementary and Secondary Education Act property tag? <i>Conduct an inventory.</i>	Yes	
33.	<div>Committees/Meetings</div> Do you participate in the institution's quarterly Site Literacy Committee meetings?	No	There is no Site Literacy Committee at the institution.
34.	Do you participate in school and/or institutional programs/projects? Explain	Yes	Western Association of Schools and Colleges, Resource Committee.
35.	Do you meet with the referral teacher for consultation about a student? How often?	Yes	Weekly Basis.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

INMATE
APPEALS

KERN VALLEY STATE PRISON
DECEMBER 1 THROUGH DECEMBER 12, 2009

The seal of the California Department of Corrections and Rehabilitation is a circular emblem. It features a green outer ring with the text "DEPARTMENT OF CORRECTIONS AND REHABILITATION" at the top and "STATE OF CALIFORNIA" at the bottom, separated by two gold stars. The center of the seal depicts a golden scale of justice and a map of California.

PRELIMINARY

CONDUCTED BY

INMATE APPEALS BRANCH

FINAL REPORT
INMATE APPEALS AUDIT
KERN VALLEY STATE PRISON
December 8 – 12, 2008

Review Team: T. Robertson, Correctional Counselor II (Supervisor), High Desert State Prison
C. Miller, Associate Governmental Program Analyst, Central California Women's Facility

SUMMARY CHART

AREA REVIEWED		RATING 2008
	Score	Page No.
OVERALL RATING	82	1
A. ACCESS TO INMATE APPEALS	56	2
B. TRACKING/FILING APPEALS	97	4
C. PREPARATION OF APPEALS	68	5
D. TIMEFRAMES	86	6
E. APPEAL RESPONSES	90	7
F. SPECIALIZED PROCESSING OF APPEALS	100	8
G. TRAINING and OFFICE STAFFING	70	10
H. CURRENT OVERDUE APPEALS	92	11

INMATE APPEALS AUDIT
FINAL REPORT

Kern Valley State Prison
December 8 – 12, 2008

INMATE APPEALS AUDIT

The findings in this Inmate Appeals Audit resulted in an overall score of 82. All areas and their results are listed below.

T. Billings, Correctional Counselor II, assigned to the Appeals Office, is experienced and knowledgeable in all facets of the appeals process. The Appeals Office support staffs, R. Munoz, Staff Services Analyst, K. Matus, Office Technician, and J. Hernandez, Office Assistant, were helpful to the audit team. They were able to locate documents needed for the Review and provide information to assist the audit team. It was indeed a pleasure to work with the Appeals Office staff.

The specific sections and their corresponding questions and scores are identified below. Copies of the Inmate Appeals Worksheets are available upon request.

A. ACCESS TO INMATE APPEALS:

Section Rating:

- 1) Do the law libraries, general population, and special housing units have the appropriate forms available on request from the inmate? [CCR 3084.1 (c)]**

45 sample # 41 # correct = 91% Question Rating: 50 **Score: 46**

All of the Facility law libraries had a supply of CDC 602, CDC 1824's, and HC 602 forms. However, some of the housing units did not have any or some of the appeals available. A couple of areas had photocopies of CDC 1824 forms that are issued to the inmates. Staffs were informed that the CDC 1824 forms are considered legal forms therefore should be copied on yellow paper as originals are required. It is noted that several of the Medical Clinics did not have HC 602 or CDC 1824 forms available.

- 2) Does the institution provide inmate access to the California Code of Regulations (CCR), Department Operations Manual (DOM), Section 54100, Inmate/Parolee Appeals, and CDC Form 1824s in each inmate law library? [DOM Section 101120.11, 54100.3]**

6 sample # 6 # correct = 100% Question Rating: 10 **Score: 10**

The forms were readily available in the law libraries. The inmate clerks also knew where to look to find the appeal forms. The DOM and CCR are made available in hard copy and on the computers in the library.

- 3) Does the institution provide the orientation inmates a written summary of the inmate's right to appeal and appeal procedures? [CCR 3002(a)(2)]**

No Question Rating: 20 **Score: 0**

The inmates are not provided orientation, nor are the appeal procedures explained to them.

- 4) **Does the institution provide the orientation inmates verbal staff instruction regarding the inmate's right to appeal and appeal procedures? [CCR 3002(a)(2)]**

No

Question Rating: 20 **Score: 0**

The inmates are not provided orientation, nor are the appeal procedures explained to them.

SECTION POINT TOTAL 56

Recommendation: *.Provide newly arrived inmates with verbal instruction regarding the right to appeal Department actions and how to do so.*

- 5) ****Does the institution provide the CDC Form 602 in both English and Spanish?**

Yes

Question Rating: 0 **Score: 0**

**** This question is for information gathering only.**

B. TRACKING AND FILING APPEALS

Section Rating:

1. Does the Inmate Appeals Office utilize the automated Inmate Appeals Tracking System (IATS) to record all appeals received at the formal levels? [DOM Section 54100.9]

Yes

Question Rating: 15 **Score: 15**

2. A review of the appeals files indicate the appeal forms have been copied on both sides and supplemental documents are attached? [DOM Section 54100.3]

25 sample # 25 # correct = 100 % Question Rating: 25 **Score: 25**

3. Does the institution implement an appeal decision (granted or granted in part) modification order within 90 days? [CCR 3084.5(i)]

20 sample # 17 # correct = 85 % Question Rating: 25 **Score: 21**

4. Is there a procedure and tracking system in place for noticing Administrative Staff of overdue appeals?
[CCR 3084.6, DOM 54100.12]

Yes

Question Rating: 35 **Score: 35**

An overdue appeal listing is submitted to the Division Heads daily during the Executive Meeting and once a week to the Chief Deputy Warden.

SECTION POINT TOTAL 96

C. PREPARATION OF APPEALS

Section Rating

- 1) **Are inmates interviewed at the first level of review or at second level if first level is waived?** [CCR 3084.5 (f) and DOM 54100.14]

25 sample # 25 # correct = 100 % Question Rating: 25 **Score: 25**

- 2) **Do the dates on the appeal correspond with the dates on the IATS?**
[DOM Section 54100.9]

25 sample # 2 # correct = 8 % Question Rating: 25 **Score: 2**

In reviewing the IATS, the majority of appeals reviewed dates did not match. The date entered as completed, did not match the date on the appeal. There were a few appeals whereas the date was not stamped on the appeal reflecting when it was returned. Furthermore, the "returned to date" was not the same as the date in IATS. There were numerous appeals which were date stamped but not processed until ten or more days later. There were several ADA appeals which were date stamped received but were not assigned until several days later.

- 3) **A review of the appeals indicate they are complete, all dates included and signatures included (all blanks filled in appropriately on the CDC Form 602)?** [DOM Section 54100.3]

25 sample # 16 # correct = 64 % Question Rating: 25 **Score: 16**

On numerous appeals the "return to the inmate" date at all levels were missing.

- 4) **Is there evidence that appeal decisions are reviewed by the institution head or his/her designee?** ?[CCR 3084.5(e)(1)]

25 sample # 25 # correct = 100 % Question Rating: 25 **Score: 25**

SECTION POINT TOTAL 68

Recommendation: . Appeals need to be assigned as received to ensure time constraints are met. The "returned to date" on the back of the appeals shall be the same date entered into IATS as the "completed" date.

D. TIMEFRAMES

Section Rating:

- 1) **Are appeals being assigned at each level within five working days of receipt in the Appeals Office?** [DOM 54100.9]

25 sample # 19 # correct = 76 % Question Rating: 25 Score: 19

- 2) **Are informal appeals completed within ten working days?**
[CCR 3084.6 (b)(1)]

25 sample # 21 # correct = 84 % Question Rating: 25 Score: 21

- 3) **Are first-level responses completed within 30 working days?**
[CCR 3084.6 (b)(2)]

25 sample # 21 # correct = 84 % Question Rating: 25 Score: 21

- 4) **Are second-level responses completed within 20 working days, or 30 working days if first level is waived pursuant to section 3084.5(c)?** [CCR 3084.6 (b)(3)]

25 sample # 25 # correct = 100 % Question Rating: 25 Score: 25

This does not reflect the numbers from the Staff Complaints.

SECTION POINT TOTAL 86

Recommendation: *These numbers are based on review of random appeals. This information was taken directly from the appeal, not from IATS as the actual dates entered into IATS did not match. Recommend that office staff is trained to ensure dates are entered accurately to reflect the dates received, assigned, and completed.*

E. APPEAL RESPONSES	Section	Rating:
<p>1) Does the institution prepare a written response at the first level of review stating the appeal issue? [CCR 3084.5 (g) and DOM 54100.15]</p> <p><u>25</u> sample # <u>20</u> # correct = <u>80</u> % Question Rating: 25 Score: 20</p>		
<p>2) Does the institution prepare a written response at the first level of review stating the reasons for the specific decision being rendered? [CCR 3084.5 (g) and DOM 54100.15]</p> <p><u>25</u> sample # <u>22</u> # correct = <u>88</u> % Question Rating: 25 Score: 22</p>		
<p>3) Does the institution prepare a written response at the second level of review stating the appeal issue? [CCR 3084.5 (g) and DOM 54100.15]</p> <p><u>25</u> sample # <u>23</u> # correct = <u>92</u> % Question Rating: 25 Score: 23</p>		
<p>4) Does the institution prepare a written response at the second level of review stating the reasons for the specific decision being rendered? [CCR 3084.5 (g) and DOM 54100.15]</p> <p><u>25</u> sample # <u>25</u> # correct = <u>100</u> % Question Rating: 25 Score: 25</p>		

SECTION POINT TOTAL 90

F. SPECIALIZED PROCESSING OF APPEALS

Section Rating:

STAFF COMPLAINTS

APPEAL RESTRICTION

STAFF COMPLAINTS

- 1) **When a staff complaint is filed against a Peace Officer, is notice given to that Peace Officer regarding the filing of the complaint? (Unit 6 Memorandum of Understanding, Section 9.09(D), Personnel Investigations, AB 05/03, DOM 54100.25.2)**

Yes

Question Rating: 20 **Score: 20**

The Confidential Memo is forwarded to the staff member, stamped confidential. The staff member can then come to the Appeals Office to obtain a copy of the complaint. The staff member must sign the log book verifying receipt of the copy.

- 2) **Is the institution keeping Staff Complaints for a period of five years? [DOM 54100.25.5 and Penal Code 832.5(b)]**

Yes

Question Rating: 20 **Score: 20**

They are maintained in the Correctional Counselor II office.

- 3) **Are all allegations of staff misconduct presented to the warden or designee for determination of the type of inquiry needed? [AB 05/03]**

Yes

Question Rating: 20 **Score: 20**

- 4) **Are all allegations of staff misconduct presented to the warden or designee at least weekly? [AB 05/03]**

Yes

Question Rating: 20 **Score: 20**

They are forwarded to the Warden's office as they are received.

APPEAL RESTRICTION

- 5) **Is there evidence of authorization from the Chief of the Inmate Appeals Branch (IAB) to place an inmate on restriction? [CCR 3084.4(3), (4)]**

Yes

100 %

Question Rating: 20 **Score: 20**

SECTION POINT TOTAL 100

Recommendation: *There were a number of Staff Complaints that were overdue. Out of 25 appeals reviewed, 14 were overdue.*



G. TRAINING/OFFICE STAFFING

Section Rating:

- 1. Is there evidence that the Appeals Coordinator works with the In-Service Training (IST) officer to ensure that training on the appeals procedure is carried out? [DOM 54100.3]**

Yes

Question Rating: 20

Score: 20

- 2. Is there evidence that the Inmate Appeals Process training is provided to new supervisors during Supervisor's Orientation? [DOM 32010.10.2]**

Yes

Question Rating: 30

Score: 30

- 3. Is there an updated Inmate Appeals lesson plan, which identifies recent changes in Department policy? [DOM 32010.8.4, 54100.3]**

No

Question Rating: 30

Score: 0

Although training is provided during Block Training, the lesson plan is outdated and does not reflect current policies.

- 4. If an inmate is assigned as a clerk in the unit, is he/she prevented from having access to the CDC Forms 602 at any level? [CCR Sections 3370(b) [component thereof]**

Yes

Question Rating: 20

Score: 20

SECTION POINT TOTAL 70

H. CURRENT OVERDUE APPEALS

Section Total:

1) What is the number of the current overdue First Level appeals and by how many days late?

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	19	.25	4.75
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

Question Rating: 50
Points deducted: 4.75
Score: 45.25

2) What is the number of the current overdue Second Level appeals and by how many days late?

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	11	.25	2.75
31-90 days	1	.50	.5
91-180	0	.75	0
181+	0	1	0

Question Rating: 50
Points deducted: 3.25
Score: 46.75

APPEALS OVERDUE FROM OTHER INSTITUTIONS (NOT COUNTED):

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	0	.25	0
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

of Appeals: 0 Points Deducted: 0 Score: N/A

SECTION POINT TOTAL 92

ADDITIONAL AREAS OF REVIEW: This portion has been added to the audit format; however, these areas of the institution are reviewed for information gathering and scores will not be obtained.

1. Law Library access for ASU/SHU inmates:

- a)** What is the process for allowing ASU/SHU inmates access to the law library?
[CCR 3122, 3160, 3164, 3343(k)]

The inmates receive access to the law library by request. The Law Library Officer schedules for access to library material and any documents needed she retrieves and brings to the Ad-Seg Unit.

- b)** How often do these inmates have access to the law library? *Once a week for a two-hour period.*

- c)** How does access to the law library differ between General Library User (GLU) and Priority Library User (PLU) inmates? *The PLU inmates are scheduled for the law library first and the remaining time goes to the GLU inmates.*

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION
BED UTILIZATION REVIEW

KERN VALLEY STATE PRISON

DECEMBER 1 THROUGH DECEMBER 12, 2008

The seal of the California Department of Corrections and Rehabilitation is partially visible behind the 'PRELIMINARY' text. It features a green circular border with the text 'DEPARTMENT OF CORRECTIONS AND REHABILITATION' at the top and 'STATE OF CALIFORNIA' at the bottom. Inside the circle is a gold scale of justice and a map of California.

PRELIMINARY

CONDUCTED BY

CLASSIFICATION SERVICES

KERN VALLEY STATE PRISON

Week of December 8, 2008

ADMINISTRATIVE SEGREGATION BED UTILIZATION REVIEW

The Kern Valley State Prison (KVSP) Administrative Segregation Unit (ASU) Bed Utilization Review was conducted during the week of 12/8/08. Correctional Counselor (CC) -III M. Scott, assisted by Captain B. Bevan and CC-II D. Long, conducted the review.

The intent of this review is to provide an evaluation of bed utilization in the ASU. This assessment is intended to be used as a management tool by the institution to assist in identifying areas that could reduce time spent in ASU and overcrowding in ASU. A review of a tracking tool entitled ASU Inmate Roster (discussed later in this report) reflected approximately 471 inmates housed in ASU as of 11/26/08. The DMS reflected a count of 515 inmates in ASU (ASU 1, ASU 2, B-1, B-2 and B-3 (20 inmates)) as of 12/7/08. Approximately 60 cases were reviewed by the team. Attached to this report is a breakdown of the cases that were reviewed.

The cases reviewed were broken down into the following categories:

37 were placed in Administrative Segregation based on a pending Disciplinary charge.

15 were placed in Administrative Segregation based on safety concerns.

8 were placed in Administrative Segregation based on gang/ disruptive group issues.

Does the institution use a comprehensive ASU tracking method that records the reason for ASU placement, track time periods for specific processes and total amount of time in ASU? Yes. Based on conversation with KVSP staff, there is a tracking tool entitled the ASU Inmate Roster which is maintained jointly by all CC-IIs. The Log was organized by ASU housing unit and cell number. The ASU Inmate Roster contains helpful information such as current 114D date, Date originally placed into ASU, Date of Initial ASU, CSR ASU extension date, Reason for Placement, and Case Status/ SHU MERD/ Yard Group. However, lack of updates to the Log was noted. The Date of the Initial ICC was often annotated with "No Initial ICC Date noted." The Reason for Placement portion was routinely blank or reflected "unk", as was the Case Status/ SHU MERD/ Yard Group. Time periods for specific processes, such as date of adjudication of RVRs or completion of investigations were not tracked. In summary, the ASU Inmate Roster appears incomplete at best and as a consequence, it's usefulness as an ASU tracking tool, is in doubt.

Comment: Although there is not a requirement that a system other than the Distributed Data Processing System (DDPS) be maintained, the DDPS capabilities are limited. A comprehensive ASU tracking system can identify a multitude of data fields, which can be customized by the needs of each specific institution. The tracking system can be very basic but still provide meaningful information that can significantly reduce workload. The system should be maintained in a format that can be sorted by specific areas to enable staff to easily identify possible problem areas at a quick glance.

GENERAL ASU CASE PROCESSING TIMES

Period from Initial Placement in ASU to CSR Review

California Code of Regulations (CCR) 3335(c)(1) requires that the Institution Classification Committee refer the case for Classification Staff Representative (CSR) review and approval when any case is retained in ASU for more than 30 days. When the initial ICC review determines that a case is not expected to be resolved within 30 days, referring the case to the CSR at the time of the initial hearing expedites this process and assures compliance with the regulation.

California Code of Regulations 3335(c) requires that inmates placed in ASU be seen by ICC within 10 days of placement.

Time from the date of placement in Administrative Segregation to the initial ICC referral for CSR Review ranged from **3** days to **17** days. Of the cases reviewed, **83%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%).

It is the expectation that cases referred for ASU retention be presented to the Classification Staff Representative (CSR) for review within 30 days of the Classification committee referral (California Code of Regulations 3335(e)).

Time from the initial ICC referral for CSR Review to the actual CSR review ranged from **7** days to **97** days. Of the cases reviewed, **60%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). Staff have explained the signature process for the CDC 128Gs contributes to the delay of preparing cases for CSR review. There is a need for improved tracking of these cases to ensure timely presentation to the CSR.

When an ASU case is reviewed by a CSR, the CSR will indicate a time period in which the case must be presented again to a CSR for further review. The expectation is that all cases should be presented back to a CSR prior to the expiration of the ASU extension approved.

Of the 60 cases reviewed, there are 13 cases currently retained in ASU beyond the CSR approved retention. This calculates to **78%** compliance in this area. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion, you would divide 42/50 which would calculate to 84%).

There were no cases noted that had been in ASU over 30 days without an ASU extension approval. **(The expectation is there should be 0 cases in this category).**

DISCIPLINARY CASES

Hearing Timelines

Once a Rules Violation Report (RVR) has been issued, simply determining the time between the issuance and the subsequent hearing does not provide an accurate measurement of the institution's efficiency in processing the case. This is due to the fact that the inmate may choose to postpone the hearing until after any District Attorney (DA) review/prosecution has occurred. Due to this factor, RVR processing must be categorized and examined separately.

A total of 50 RVRs were reviewed.

RVRs heard without postponement:

Twenty (20) RVRs were examined.

Time from the date of the issuance of the RVR to the date the RVR was heard ranged from 4 days to **84** days. The non-postponed RVRs reviewed were adjudicated, on average within 40 days from the date of the RVR.

RVRs heard with postponement pending DA action:

Eight (8) RVRs were noted. Note: RVRs which were originally postponed but later rescinded were included in this count.

Time from the date of the RVRs to the date the RVRs were heard ranged from 60 to 228 days, for an average of 131 days. ISU's method of receiving incident reports and processing DA referrals is discussed later in this report.

Post-Hearing Processing Timelines

Following the completion of the hearing by the disciplinary hearing officer or committee, there are no due process timeframes to interfere with rapid completion of the remainder of the disciplinary process. The time is measured from the hearing date through the ICC review. There are several reviews that must occur during this period. Each review is measured.

Twenty two (22) RVRs are still pending. For the most part, reviewers were unable to determine whether the pending RVRs had been postponed by the inmate pending DA referral outcome. In some cases, ICC addressed in the CDC 128G whether the inmate had postponed the hearing.

Hearing to Facility Captain Review:

Per the Deputy Director memorandum dated March 26, 2003, the expectation is this time will be within 5 working days.

Time from the date of the RVR hearing to the date the RVR was audited by the Facility Captain ranged from **3** days to **87** days.

Of the cases reviewed, **21%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). On average, the Captain's review of the RVR occurred 21 days after the hearing.

Hearing Officer staff were interviewed regarding the disposition of the RVR after the hearing has occurred. Staff reported the disposition of the RVR was typed by staff (including the SHO) or forwarded to the Facility Inmate clerk for typing, with this process taking approximately two days to two weeks. Once the SHO has signed the RVR, the RVR is forwarded to the Captain's office assistant where it is logged in by the office assistant and given to the Captain for signature. Management should review the processes by which heard RVRs are typed and forwarded to the Captain to determine exactly where this process is breaking down and develop effective remedy.

Facility Captain to Chief Disciplinary Officer Review:

Per the Deputy Director memorandum dated March 26, 2003, the expectation is this time will be within 3 working days.

Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer ranged from “0” (as in same day as Captain’s review) days to **28** days.

Of the cases reviewed, **46%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). On average, the CDO’s review occurred 5 days after the Captain’s review.

Chief Disciplinary Officer to ICC review:

Per CCR 3335(d) (1) (2), upon resolution, the ICC shall review the inmate’s case within 14 days.

Time from date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from “0” days (as in reviewed by ICC the same day of CDO signature) to **68** days.

Of the cases reviewed, **23%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). Time from the date the CDO audited the RVR to the case being reviewed by ICC averaged 26 days.

One case was noted which appeared to be languishing in ASU. This was the case of FLAGG, J-38690 who received an RVR dated 7/28/08 for Possession of a Weapon. This RVR was adjudicated on 10/21/08; however, there has been no ICC review since 8/7/08. There was no indication in the file the inmate had departed the institution for court or medical/ mental health reasons.

Based on the low percentage of cases seen by ICC within 14 days of CDO audit, Staff should examine the method of how classification staff are notified of adjudicated RVRs. Per conversation with classification staff there is a process in place where-in the adjudicated RVR is placed in the ASU –tagged file by Records Staff. The file is then placed on the Counselor’s shelf. But accounts from classification staff indicate the actual method of adjudicated RVR notification varies from the process described above. Some classification staff reported the adjudicated RVR is forwarded to them by the yard or disciplinary staff. Other classification staff reported the presence of the adjudicated RVR in the central file during the course of routine case preparation for ICC was typically how they were made aware of an adjudicated RVR. Once notified of the adjudicated RVR, the case should be scheduled for the next available ICC (rather than the next 60 or 90 day routinely scheduled ICC) especially if transfer referral or release from ASU may be involved.

Parole Violator Cases referred to the Board of Prison Hearings (BPH) for review:

The number of parole violator (return to custody/ RTC) cases was insufficient to provide a fair review. Therefore, the time-frames related to BPH referrals, were not examined.

Incident Report Processing

Once an incident has occurred, the Incident Report must be prepared and completed. This timeline measures the process within the institution as it completes the report, forwards it to its Investigative Services Unit (ISU) and the subsequent response time from the office of the District Attorney (DA) or the ISU screen-out based on local agreement with the DA.

Per interview with ISU, ISU staff become aware of an incident within 24 hours of the incident based on DIRS (Daily Incident Reporting System). A Computer log of the incident reports is maintained by the Court Liaison Officer in ISU. The Log displays information such as the Incident Report Number, Charge, Date of Incident, Location of Incident and status of Incident Report which includes varying and non-standardized information related to each incident report (date Incident Report received, date declined per Memorandum of Understanding (MOU), Date of DA accept or reject). During the audit, reviewers consistently noted lack of documentation in the file to indicate whether the case had been referred to the DA. Periodically, a memorandum entitled "Kern Valley State Prison District Attorney Referral Status Report" was found in the file containing the statement "No referral to the District Attorney was made per the MEMORANDUM OF UNDERSTANDING" BETWEEN THE California Department of Corrections and Rehabilitation, Kern Valley State Prison and the Kern County District Attorney's Office." This wording led reviewers to believe the Incident was not referred to the DA but was screened out by ISU staff. KVSP ISU staff reported implementation of an updated memorandum entitled "Kern Valley State Prison District Attorney Referral Status Report" to more clearly explain whether and when the case was referred to the DA, accepted or rejected. A sample copy of this updated memorandum was provided to reviewers. The updated memorandum was a significant improvement over the prior memorandum but was not found in any of the reviewed cases most likely due to its novelty. ISU reports documentation related to DA referral status is taken to records for placement in the file by the Records Staff.

The lack of DA referral information in the files, combined with the non-standardized information in the Log pertaining to each incident report, contributed to the reviewers' inability to extract sufficient data for fair representation and examination of incident report processing time frames. Therefore these areas were not evaluated. Although not formally evaluated, the timeliness of the DA screen-out by ISU should be monitored as there seemed to be excessive time lapse from the date of the incident to the date ISU determined referral to the DA would not be made. (See ESTRADA T-71735 and FALCON T-45226 on attached DISCIPLINARY Casework Listing for examples). The following is provided for informational purposes:

Regarding date of the incident occurrence to the date ISU receives the CDC 837:

Per the Deputy Director Memorandum dated March 26, 2003 the complete package will be presented to ISU within 21 calendar days.

Regarding date ISU receives the CDC 837 to DA screen-out or referral: **Per the Deputy Director memorandum dated March 26, 2003 the expectation is the time should not exceed 5 working days.**

Regarding DA Referral to Resolution: **This is one area that the institution has no definitive control over, however, it is suggested that the institution work closely with the DA's office to track the decision making process to resolution of either acceptance of the case for prosecution or rejection of the case for prosecution.**

SAFETY CONCERNS

When an inmate is placed into ASU based on safety concerns, which must be investigated, there are no due process time constraints that delay the resolution and completion of the investigation. The amount of time taken to complete this type of investigation varies and generally reflects the amount of resources utilized to conduct the investigation.

There were 15 cases reviewed that were placed in Administrative Segregation based on the need for investigation of safety concerns.

Investigation initiation to Completion:

Per the Deputy Director Memorandum dated March 26, 2003 the expectation is this time should not exceed 30 calendar days.

Time from the date of referral to staff for investigation to the date the investigation was concluded ranged from "0" days (as in completed same day of referral) to **218** days. The "218 day" case (CURTIS H-09068) was well outside of the normal completion of investigation time-frames and involved an inmate originally placed into ASU due to safety concerns, who also received an RVR for Attempted Battery on Staff while in ASU.

Of the cases reviewed, **50%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). Excluding the extreme "218 day" case, investigations were completed on average, within 31 days.

Investigation Completion to ICC Review:

Per CCR 3335(d) (1) (2), upon resolution, the ICC shall review the inmate's case within 14 days.

Time from conclusion of the investigation to ICC review of investigation results ranged from "0" days (as in case seen by ICC the same date the investigation concluded) to **64** days.

Of the cases reviewed, **46%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%). On average, cases were seen by ICC within 23 days of the conclusion of the investigation.

GANG INVESTIGATION/VALIDATION/DEBRIEFING

When an inmate is placed into ASU based on the need for investigation of gang activity, there are no due process time constraints, which delay the resolution and completion of the investigation. This timeline measures the amount of time taken to complete this type of investigation, the review by the Office of Correctional Safety (OCS) and the time to review and conclude the issue by ICC and CSR.

There were 8 cases reviewed that were placed in Administrative Segregation based on Gang Investigation/Validation/Debriefing.

ASU Placement to Referral to IGI for Investigation:

Days from ASU placement to IGI investigation assignment being received by IGI could not be determined with reliability as the files routinely did not contain documentation which indicated the date the investigation began. In some cases it appeared the investigation began well before the inmate was placed into ASU. For cases in which the start of the gang investigation could not be determined, the date of ASU placement was used for calculation purposes.

Days from ASU placement to IGI investigation assignment being received by IGI ranged from "0" days (as in investigation assignment received by IGI the same date of ASU placement) days to **63** days.

Initiation of IGI investigation to Conclusion of Investigation:

Days from IGI investigation assignment to receipt of completed investigation ranged from **26** days to **243** days.

Conclusion of Investigation to ICC Review:

This area was not evaluated as the case worksheets and corresponding EXCEL program were not designed to capture this updated information. For informational purposes:

Per CCR 3335(d) (1) (2), upon resolution, the ICC shall review the inmate's case within 14 days.

NUMBER OF INMATES IN ASU ENDORSED & AWAITING TRANSFER

Documentation in the central files indicates that 20 of the 60 cases reviewed in ASU are currently endorsed and awaiting transfer. KVSP staff also advised, as of 12/5/2008, a total of 60 ASU SNY inmates were endorsed and awaiting transfer to other institutions and 36 ASU inmates were endorsed to KVSP, awaiting beds.

GENERAL OBSERVATIONS

There appears to be a lack of adequate tracking to monitor the major processes which contribute to an inmate's length of stay in ASU. The major processes which effect ASU length of stay include timely adjudication of the RVRs and conclusion of investigations and timely presentation of cases to ICC upon conclusion of these actions for transfer referral or potential release from ASU.

1. An effective tracking log needs to be developed to monitor the movement of the heard RVR from the SHO to the Captain as this process seems to have broken down at some point.
2. The flow of the CDC 128G should be monitored to ensure timely CSR presentation in accordance with CCR section 3335(e).
3. A procedure needs to be developed and enforced to ensure classification staff are promptly notified of adjudicated RVRs in order that the case may be scheduled for the next available ICC, especially where transfer or release from ASU is involved.
4. The ASU Inmate Roster tracking tool was incomplete and would benefit from improved update. The ASU Inmate Roster would also benefit from amendment to include status of RVRs and investigations. An ASU tracking tool developed by NKSP serves as an excellent example.

Other:

- The lack of documentation in the central files related to status of DA referrals was noted. As mentioned earlier in this report, ISU has already taken steps to clarify and document the status of DA referrals via a redesigned memorandum which more clearly addressed the status of the DA referral. Disciplinary cases involving

DA referrals should be closely monitored to ensure this redesigned and improved memorandum is being generated and placed in the central files in a timely manner.

- During the audit, cases were noted where-in ICC indicated the inmate was to be released from ASU at expiration of MERD. A check of DDPS for several of these cases reflected the inmates were still housed in ASU however a new CDC 114D had not been completed reflecting the reason for continued ASU retention. A follow-up procedure needs to be developed to ensure the inmate is released from ASU upon expiration of MERD or a new CDC 114D is generated in the event the inmate remains in ASU beyond the MERD.
- As a positive reflection on the disciplinary process, it was noted non-postponed RVRs are being heard in a timely manner.

KVSP staff were helpful and cooperative in supplying information, documents and central files related to this audit. Their assistance was greatly appreciated. The work area in IST provided for the auditors was very clean and this was also appreciated.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPH Desk	Days from BPH Desk To BPH for Offer	Days to BPH Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Referral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placement	Comments
V37048	11	43	12/27/08	0	10/31/08	Batt I/M	No	4	5	1	29	NA	NA	NA	NA	NA	NA	NA	107	MERD of 10/8/08 expired, issued new CDC 114D on 10/29/08 due to safety concerns
K73651	6	24	1/19/09	0	9/9/08	OverFamiliar	unk	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	125	RVR not heard. OIA investigation ongoing
T69456	6	70	5/18/09	0	11/19/07	Consp Batt Staff	unk	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	403	RVR not heard. While in ASU, received addnl RVRs of 6/10/08 and 7/24/08. Active MERD of 5/18/09 noted. RVRs for Consp and Weapons not referred per MOU.
	0	0	1/0/00	NA	11/2/07	Drug Para	No	31	8	10	27	NA	NA	NA	NA	NA	NA	NA	0	0
	0	0	1/0/00	NA	6/10/08	Weapon	No	54	18	1	11	NA	NA	NA	NA	NA	NA	NA	0	0
	0	0		NA	7/24/08	Weapon	No	22	56	4	14	NA	NA	NA	NA	NA	NA	NA	0	0
H57600	5	30	9/22/08	78	6/19/08	Batt I/M	No	35	35	28	40	NA	NA	NA	NA	NA	NA	NA	173	SIEFERT. Per 262 entry, referred for level IV SNY transfer via ICC of 11/4/08. No CSR review since 7/24/08.
P24726	9	48	see comment	NA	6/20/08	Sex Behav	No	84	43	3	35	NA	NA	NA	NA	NA	NA	NA	*196	Originally p/l ASU on 5/20/08 due to overfamiliarity. 8/11/08 114D reissued based on RVR of 6/26/08 Sex Behavior. RVR reissued/ reheard. *Per 262 entry I/m released to GP on 12/2/08
V10557	9	23	12/23/08	0	8/19/08	Drug Distr	unk	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	135	RVR not heard. "S" based on DPW. End 10/23/08 CMCE ASU Hub.
F02501	7	77	11/21/08	18	9/10/08	Drug Distr	unk	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	117	RVR not heard. Document dated 10/10/08 indicates "Do not transfer pending DA referral." No other Docs in file to indicate date of referral or whether postponed by I/M.
T45226	9	28	11/30/08	9	2/5/08	Weapon	Yes	136	11	0	37	NA	NA	NA	NA	NA	NA	NA	308	FALCON. Per memo of 5/23/08, "no referral to the District Attorney was made..."per MOU. Hearing originally held on 6/20/08. Ordered re-issue/ reheard on 8/7/08. New 114D issued 8/4/08 due to Prison gang investigation. Per 262 entry ICC of 11/20/08 referred for SHU audit
T71735	6	22	12/23/08	0	2/8/08	Batt I/m Weap	yes	75	13	10	18	NA	NA	NA	NA	NA	NA	NA	305	ESTRADA. Per 115A, I/M postponed. Per memo of 4/1/08, not referred to DA per MOU. Hearing held on 4/23/08. 11/26/08 new 114D issued due to safety concerns. Active MERD of 12/23/08. ICC of 12/2/08 referred for SNY transfer--not seen by CSR.
T17605	11	24	11/1/08	38	8/1/08	Riot	No	35	4	7	7	NA	NA	NA	NA	NA	NA	NA	130	Originally p/l ASU 8/1/08 due to Riot. 4 month SHU term approved with MERD of 11/1/08. New 114D issued 9/23/08 for Shu Indeterminate. ICC of 12/2/02 referred for Shu Indeterminate. Not seen by CSR.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPH Desk	Days from BPH Desk To BPH for Offer	Days to BPH Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Referral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placement	Comments
T73670	5	22	3/2/09	0	8/14/08	Threat Staff	No	29	19	1	21	NA	NA	NA	NA	NA	NA	NA	122	7 month SHU approved with MERD of 3/2/09. End COR SHU via CSR of 11/26/08
H54580	9	37	1/11/09	0	7/6/08	Batt I/m	unk	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	156	RVRs not heard. One memo in file dated 8/20/08 indicating 1 RVR will not be referred to the DA.
F14502	10	35	2/10/09	0	8/4/08	Weapon	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	127	RVR not heard. Pending DA referral
E96830	10	24	10/26/09	0	5/8/08	Batt I/m Weap	Yes	60	27	11	68	NA	NA	NA	NA	NA	NA	NA	227	Postponement rescinded 6/11/08. Not referred per MOU per memo of 9/16/08. End COR SHU 11/26/08 with MERD 10/26/09.
V92024	10	35	2/10/09	0	8/4/08	Weapon	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	127	RVR not heard. No documentation in the file related to DA referral.
T13146	10	28	3/10/09	0	9/1/08	Batt I/m Weap	unk	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	99	RVR not heard. Per 128G of 9/11/08 case referred to DA but no other documentation in the file noted.
J24445	12	35	12/24/08	0	7/12/08	Drug Distr	unk	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	150	RVR not heard. No documentation in the file related to DA referral.
T21512	10	28	2/17/09	0	8/11/08	Batt I/m Weap	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	120	RVR not heard. Per "post it note" i/m postponed pending DA and referred to DA.
J38690	10	35	2/3/09	0	7/28/08	Weapon	Yes	73	11	1	see commen	NA	NA	NA	NA	NA	NA	NA	134	FLAGG. Not referred per MOU (LWOP). No ICC since 8/7/08.
P29579	7	14	9/12/10	0	6/25/08	Att Murd I/M	No	28	13	3	20	NA	NA	NA	NA	NA	NA	NA	180	Not referred per MOU memo of 9/16/08. Active MERD of 9/12/2010 noted. Recvd additional RVR of 7/15/08 for Mass Disturbance. ICC of 10/30/08 referred case for SHU transfer.
	0	0	1/0/00	0	7/15/08	Mass Distur	No	27	40	2	See commen	NA	NA	NA	NA	NA	NA	NA	0	No ICC review related to RVR of 7/15/08
T63921	6	28	10/22/08	48	7/14/08	Threat Staff	No	41	9	9	40	NA	NA	NA	NA	NA	NA	NA	144	GLASS. ICC of 10/21/08 referred for SHU audit. Recvd additnl RVR of 9/16/08 Disobey Orders. ICC of 10/21/08 indicated i/m to be released to GP at MERD of 11/7/08. As of 12/9/08 i/m is still in ASU per DDPS. No new 114D noted.
	0	0	1/0/00	0	9/16/08	Disobey Orders	No	41	3	4	see commen	NA	NA	NA	NA	NA	NA	NA	0	Not addressed by ICC
K64008	12	37	3/6/09	0	6/5/08	Weapon	No	52	18	7	0	NA	NA	NA	NA	NA	NA	NA	187	Originally p/I ASU due to Weapon. RVR reduced to Contraband. New 114D on 6/17/08 for Safety Concerns. Investigation completed on 7/2/08 and endorsed 11/6/08 RJD-IV SNY

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPH Desk	Days from BPH Desk To BPH for Offer	Days to BPH Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Referral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
T98104	8	56	1/16/09	0	7/16/08	Batt I/M	no	51	11	8	50	NA	NA	NA	NA	NA	NA	NA	146	SANDOVAL. Originally p/I ASU due to Batt I/M. New 114D issued 7/24/08 for Safety concerns. Investigation completed 7/24/08. ICC of 7/31/08 referred for transfer and 9/18/08 endorsed KVSP-IV SNY. Released to GP per ICC of 11/13/08. Per DDPS still in ASU as of 12/10, with no new 114D.
V69595	13	63	1/13/09	0	7/4/08	Weapon	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	158	RVR not heard. No documentation in the file related to DA referral except memo at front of file "Do not transfer pending DA referral".
V54436	10	22	12/25/08	0	8/10/08	Weapon Indecent Exp	No	34	4	1	12	NA	NA	NA	NA	NA	NA	NA	487	Active MERD of 12/25/08 noted.
K96944	9	15	2/10/09	0	8/5/08	Weapon	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	127	RVR not heard
V48614	10	35	12/15/08	0	1/7/08	Weapon	Yes	185	50	5	22	NA	NA	NA	NA	NA	NA	NA	703	Postponement rescinded on 6/10/08. Active MERD of 12/15/08. Retained in ASU for Shu indeterminate referral per new 114D of 11/6/08.
T81655	16	7	3/8/09	0	2/13/08	Weapon	Yes	226	3	1	see commen	NA	NA	NA	NA	NA	NA	NA	301	Per memo 8/28/08 no referral was made to the DA per MOU. No ICC review since 9/9/08. Recvd additional RVR of 8/7/08 for Weapon noted.
	0	0	1/0/00	0	8/7/08	Weapon	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0	RVR not heard
F25973	4	48	2/13/09	0	4/20/08	Mut Comb	Yes	68	41	14	26	NA	NA	NA	NA	NA	NA	NA	234	Originally RVR was for Batt I/M Weapon but found guilty of Mutual Combat. RVR was not referred. Per 114D of 9/16/08 ASU retention is due to safety concerns. Investigation completed 8/24/08. End 10/16/08 PVSP-IV SNY
G10180	4	21	6/18/09	0	8/3/08	Batt I/M GBI	no	42	15	1	7	NA	NA	NA	NA	NA	NA	NA	129	Active MERD of 6/18/09 noted. End COR-SHU 11/20/08
T52354	9	15	2/10/09	0	8/5/08	Weapon	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	127	RVR not heard. Not referred per memo of 10/15/08 per MOU. Auditor notes RVR should have been heard by 11/15/08-- status unknown.
v37950	7	20	2/13/09	0	5/15/08	Batt Staff	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	209	RVR not heard.
V58938	9	55	3/14/09	0	7/8/08	Batt Staff	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	155	RVR not heard Recvd additional RVR of 10/3/08 Refuse Order---not heard.
	0	0	1/0/00	0	10/3/08	Ref Order	No	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	0	RVR not heard.
V00948	10	15	2/10/09	0	8/4/08	Weapon	Yes	Not heard	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	128	RVR not heard.
V85883	8	14	1/0/00	see comment	4/23/08	Batt I/m Weap	No	79	23	11	28	NA	NA	NA	NA	NA	NA	NA	231	Memo of 9/24/08 indicates no referral due to MOU. OTC 5/26/08 to 6/24/08. Recvd additional RVR of 7/8/08 while in ASU. CSR deferred SHU audit/ SHU transfer but did not give a return date.
	0	0	1/0/00	0	7/8/08	MassDistur	No	24	87	4	see commen	NA	NA	NA	NA	NA	NA	NA	0	RVR not reviewed by ICC

DISCIPLINARY

[illegible]

SAFETY

CDC #	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	How many days since ASU extension expired	Date of Referral to Staff for Investigation	Days to Completion of Investigation	Conclusion of Investigation to ICC Review	ICC referral to CSR After conclusion of Investigation	Days in ASU to date	Comments
J44751	12	30	2/13/09	0	7/29/08	64	4	0	145	End RJD-IV SNY 10/16/08
J52548	7	31	3/14/09	0	10/9/08	3	4	0	63	End RJD-IV SNY 11/14/08
J48028	7	45	12/5/08	4	7/15/08	0	28	0	147	CHEN While in ASU received RVR of 7/21/08 for Masturbation. RVR not heard. Annotation on 804 indicates RVR heard on 8/27/08 and I/M found guilty. ICC of 12/2/08 indicates disciplinary process still pending.
H09068	12	51	12/7/08	2	5/13/08	218	see comment	0	222	Originally p/I ASU 5/1/08 due to safety concern, but on 5/31/08 recvd RVR of 5/31/08 for Att Batt Staff. Per post-it note on RVR, RVR heard 9/3/08. No ICC since 6/10/08.
T71642	7	23	9/20/08	80	8/19/08	45	33	7	120	Placed in ASU due to safety concerns. Became EOP 8/21/08. End CMCE EOP ASU Hub on 9/10/08. I/m claimed addtnl safety concerns after completion of initial investigation. ICC of 11/4/08 referred for transfer to MCSPEOP SNY. No CSR review since 9/10/08. While in ASU received RVR of 9/24/08 Resist P/O which was adjudicated 10/28/08.
F14030	8	35	10/27/08	43	8/28/08	46	4	32	111	Per 262 entry of 11/10/08, referred for additional 90 day ASU extension
P90309	11	15	3/7/09	0	6/10/08	80	64	17	193	New 114D issued 8/6/08 due to investigation into criminal activity. 114D reissued 10/21/08 to reflect safety concerns. Endorsed 11/7/08 MCSP-IV SNY .
F80193	17	21	3/14/09	0	8/28/08	58	15	0	120	Endorsed 11/14/08 to COR-III SNY.
F34960	5	16	3/20/09	0	6/12/08	4	43	0	180	End HDSP-IV SNYon 11/20/08.
P68862	9	23	2/6/09	0	7/8/08	30	14	0	163	Endorsed 10/9/08 RJD-IV SNY.
p43927	5	15	3/14/09	0	9/4/08	47	0	0	97	Endorsed MCSP-IV SNY on 11/14/08.

SAFETY

[illegible]

GANG

CDC #	DAYS FROM 114D to INITIAL CSR REFERRAL	DAYS FROM INITIAL ICC REFERRAL TO CSR REVIEW	Expiration date of current CSR ASU Extension	If ASU extension is expired, how many days	Days from ASU Placement To Investigation Assignment being Received by IGI/Staff	Days to Completion of Investigation	Days from Completion of Investigation by IGI to LEIU For Validation	Days from referral to LEIU to Receipt of 128B-2	Days in ASU to date	Comments
T95716	3	97	2/10/09	0	63	58	14	6	281	Placed in ASU due to Gang investigation. While in ASU received RVR of 6/10/08 for Weapon. RVR not heard. Postponed pending DA. No documentation in the file to indicate case was referred to DA
F56482	6	24	12/5/08	5	0	97	0	pending	301	Awaiting 128B-2 from OCS
V27550	10	28	10/9/08	62	0	109	25	24	233	While in ASU recvd RVR of 10/14/08 Att Murder with Weapon--RVR still pending.
K53768	6	28	3/24/09	0	6	Incomplete	NA	NA	229	While in ASU recvd for Weapon/ Dangerous Contraband. Updated 114D of 9/16/08 noted. CSR of 9/10/08 expressed concern re progress of validation. No infor in file regarding DA referral.
C81192	8	38	see comment	0	0	33	0	113	301	While in ASU recvd RVRs of 7/8/08 for Mass Distur.--adjudicated 9/19/08, and 9/30/08 Weapon--not heard. CSR of 10/29/08 did not give return date.
P55895	4	58	12/5/08	5	0	243	0	pending	278	CDC 128B-2 not recvd yet.
V77883	8	57	12/13/08	0	8	Incomplete	NA	NA	212	Investigation incomplete
P67708	11	30	3/7/09	0	11	26	not validated	NA	103	Investigated for "2.5"--IGI concluded "S" not affiliated. End 11/7/08 MCSP-III SNY

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

RADIO
COMMUNICATIONS

KERN VALLEY STATE PRISON
DECEMBER 1 THROUGH DECEMBER 12, 2008

The seal of the California Department of Corrections and Rehabilitation is partially visible behind the 'PRELIMINARY' text. It features a green circular border with the text 'DEPARTMENT OF CORRECTIONS AND REHABILITATION' at the top and 'STATE OF CALIFORNIA' at the bottom. Inside the seal is a map of California with a scale of justice and stars.

PRELIMINARY

CONDUCTED BY

TELECOMMUNICATIONS

Review of Radio Communications

Kern Valley State Prison (KVSP)

Introduction

This review of Radio Communication Operations at Kern Valley State Prison KVSP was conducted by the Compliance/Peer Review Branch (CPRB), Office of Reviews and Compliance and the Radio Communications Unit (RCU), between the dates of December 8 through 12, 2008. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation (CDCR) Department Operations Manual (DOM), State Administrative Manual (SAM) and Administrative Bulletin (AB) 90/35 as the primary sources of operational standards.

This review was conducted by Robert Hardmeyer, Project Manager, of the Facilities Planning and Management Division, Telecommunications Section, Radio Communications Unit.

The review consisted of an on-site inspection, interviews with staff, reviews of procedures, and observation of institutional operations.

The purpose of the CPRB review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations as applied to Public Safety Communications. Each area was reviewed with staff and any problems were reviewed or solved with the KVSP Radio Liaison. Overall, findings presented in the attached report represent the consensus.

Review of Radio Communications

Kern Valley State Prison (KVSP)

REVIEW SCOPE AND METHODOLOGY

The CPRB and the RCU conducted an on-site review at KVSP during the period of December 8 through 12, 2008. The purpose of this review was to assess the level of compliance with established State regulations in the areas of Public Safety Communications. This review and the attached findings represent the formal review of KVSP compliance by CPRB.

The scope and methodology of this review was based upon written review procedures developed by the CPRB and provided to KVSP staff in advance of the review.

Random sampling techniques were employed as an intrinsic part of the review process. Throughout the tour, on-duty custody staff was interviewed regarding current practices, all staff was polite and professional when asked these questions.

A random sample of radios were reviewed, checking the Radio as to the Post Assignment, the Department of General Services (DGS) 'S' number and the radio serial number. Utilizing the inventory to prove the proper radio location, KVSP was at 100% on radio placement.

The System Watch and The Selective Inhibit Dynamic Regrouping (SIDR) computer were evaluated and are working properly at this time.

The Radio Vault was inspected and found to be in good condition.

The Primary Emergency Operations Center control station, located in the Warden's Office was working properly.

Recommendations are to continue normal practices as KVSP has no issues with usage of the 800 MHz Trunked Radio System and all KVSP staff are following all required Public Safety Standards.

The Reviewer would also like to complement the Radio Liaison at KVSP (Officer Marquez) as his organizational skills and overall help made this review a success.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

CASE RECORDS

KERN VALLEY STATE PRISON
DECEMBER 1 THROUGH DECEMBER 12, 2008

The seal of the California Department of Corrections and Rehabilitation is a circular emblem. It features a green outer ring with the text "DEPARTMENT OF CORRECTIONS AND REHABILITATION" at the top and "STATE OF CALIFORNIA" at the bottom, separated by two gold stars. The center of the seal depicts a golden scale of justice and a map of California.

PRELIMINARY

CONDUCTED BY

CASE RECORDS ADMIN

KERN VALLEY STATE PRISON COMPLIANCE REVIEW

Correctional Case Records Services lead a three member team comprised of Kathy Moore, Correctional Case Records Administrator, Pam Webster, Correctional Case Records Manager, Pleasant Valley State Prison, and Linda Jaramillo, Correctional Case Records Supervisor, Central California Women's Facility to conduct a compliance review December 8-12, 2008 of specific areas within the Kern Valley State Prison records office.

Administrative staff and the Correctional Case Records Manager were aware of this review in advance and all staff was cooperative and assisted with providing information to the review team when requested.

The two primary areas reviewed were:

1. Holds, Warrants and Detainers (HWD)
2. Warden's Checkout Order (CDC 161)

An overview of the findings in the review process is outlined in this document.

This review consisted of 43 Central Files of recently paroled inmates and an additional 24 Central Files for HWD purposes for a total of 67 Central Files reviewed.

HOLDS, WARRANTS AND DETAINERS (HWD)

Reference: DOM Section 72040.5 & 72040.5.1 & 72040.5.3 & CR 97/04

"The HWD system ensures that information regarding any specific or potential detainer is recorded and called to staff attention within four hours of receipt to determine what effect, if any, the hold might have on an inmate's custody."

"The HWD Coordinator shall prepare letters of inquiry or initiate teletype requests to resolve potential holds based on the CDC Form 850s completed by institution staff and complete necessary follow-ups on any communication received from law enforcement agencies. The CDC Form 850 shall be attached to the top of the detainer section of the Central File and all such actions shall be entered in the HWD log."

"The HWD Coordinator's initial request to obtain information shall be completed within two working days and follow-up at the 60-day and 10-day audits prior to release. Telephonic follow-up should be used at the 10-day audit."

"If a detainer exists or is believed to exist on an inmate, the HWD coordinator shall prepare a CDC Form 850 documenting the pertinent facts, and immediately contacting the designated staff person responsible for evaluating the potential detainer..."

**KERN VALLEY STATE PRISON
COMPLIANCE REVIEW**

“Release Prior to Parole. It is imperative that when an inmate is released prior to their parole date, pursuant to Penal Code Section 4755, that a CDC Form 801, Detainer, accompanies the inmate to ensure that he/she remains in custody until his/her actual parole date.”

*Reference: DOM Section 72040.9 & CR 99/23
“When the records office receives notification that a detainer previously placed on an inmate has been dropped or expired, the HWD computerized history for that detainer shall be deleted”.*

*Reference: DOM Section 72040.6.1 & 72040.6.2 & CR 95/01 & CR 02/06
“If the detainer is from a California agency for untried charges, the inmate may request disposition of pending charges by filing a CDC Form 643, Demand for Trial in accordance with the provisions of PC 1381”.*

“Case records staff shall mail the CDC Form 643 to the DA by certified mail, return receipt requested”.

“PC 1381 stipulates a person must be brought to trial within 90 days after written notification of the place of confinement. The 90-day period starts the day the DA acknowledges receipt of the CDC Form 643”.

“If the inmate is not brought to trial at the conclusion of the 90-day period, case records staff shall prepare:

A CDC Form 668, Affidavit in Support of Motion to Dismiss Pending Charges.

A CDC Form 669, Motion to Dismiss Criminal Charges Pending.

A CDC Form 670, Order of Dismissal.

A CDC Form 1006, Cover Memo - Motion to Dismiss.

All of these forms shall be forwarded to the court having jurisdiction of the Matter”

Desk Procedures for the HWD clerical staff were reviewed and the clerical staff were interviewed. The desk procedures are well written however, there are some processes that need to be incorporated into the procedure. Instructions need to be incorporated into the procedures for which appropriate option for disposition, on the CDC 661, should be given to the inmate.

Of the 26 cases reviewed there were discrepancies noted in 21 of the cases. A breakdown of the discrepancies discovered is listed below with Inmate's CDC# and Name to allow staff to correct the noted discrepancies. As the discrepancies are consistent, it appears training and guidance are needed for the appropriate staff.

**KERN VALLEY STATE PRISON
COMPLIANCE REVIEW**

The Departmental Policy, DOM Section 72040.5.1, dictates that the... *HWD Coordinator's initial request to obtain information shall be completed within two working days*", however the following 4 cases were found not to be in Compliance.

**G31595 Valdez
V21679 Corral
G10188 Graham
G30241 Williams**

In the following case, V25278 Martinez, it was noted that a Letter of Inquiry (LOI) was received from the agency stating there was a warrant received on 9-18-08, however, there was not a follow-up conducted until 10-16-08.

Pursuant to DOM Section 72040.9,...*"When the records office receives notification that a detainer previously placed on an inmate has been dropped or expired, the HWD computerized history for that detainer shall be deleted"*. As listed below the following inmate's holds have not been deleted either from the Automated Release Date Tracking System (ARDTS) or the Offender Based Information System (OBIS).

**G33212 Plooy (OBIS & ARDTS)
G29502 Pacheco (ARDTS)
H64842 Harrell (ARDTS)
G26468 Mc Neal (ARDTS)
F53299 Cano (ARDTS)**

In case F53299 Cano, a hold is reflected in ARDTS, however a hold was not found either in the Central File or in OBIS. In case H64842 Harrell, a hold was noted in ARDTS however, the inmate had paroled on this hold on 4/2/2004. Upon intake at KVSP on 5-24-06, this information appeared to have been reentered into ARDTS in error and has never been corrected.

Dom Section 72040.5, states...*"The HWD system ensures that information regarding any specific or potential detainer is recorded and called to staff attention within four hours of receipt to determine what effect, if any, the hold might have on an inmate's custody."*

Of the 26 cases reviewed, the following discrepancies were noted in 17 of the cases. In the majority of these cases we were unable to determine that there is compliance in the area of the 4 hour policy as the CDC 850's did not reflect the time the hold was received or the time it was entered into OBIS. Also, the warrant/hold information received by Teletype is not being date stamped. The

**KERN VALLEY STATE PRISON
COMPLIANCE REVIEW**

staff are relying on the time and date reflected on the teletype transmittal. Listed below are the cases where discrepancies were noted.

V25278 Martinez
G26483 Davenport
F60928 Hernandez
T07995 Martinez
G26016 Barnett
G32850 Lopez
G16963 Espinoza
F28368 Vallarino
G06348 Johnson
T96152 Clark
G31595 Valdez
G30241 Williams
G08736 Cruz
G15518 Davis
T87223 Morgan
G26632 Martinez
G33212 Plooy

There were also 9 of these cases where there was a number of days between when the hold/warrant/detainer was received and when it was recorded in OBIS or documented on the CDC Form 112. They are as follows, with specifics:

V25278 Martinez – The warrant was received on 10-16-08, the evaluator reviewed on 10-17-08, was entered on the CDC 850 and the CDC 112 and entered into OBIS on 10-20-08.

G26483 Davenport - The warrant was received on 10-24-08, evaluator reviewed on 10-27-08, the CDC 850 was posted on 10-27-08 and the time was not reflected, and the date on the CDC 112 was not posted.

T07995 Martinez – The warrant was received on 12-15-08, all the warrant information documented on the CDC 850 is dated 12-26-08.

F28368 Vallarino – The warrant was received on 10-27-08, the CDC 850 the CDC 112, the OBIS and ARDTS entry was not completed until 10-28-08.

G30241 Williams – The warrant was received on 12-09-08, the CDC 850 and the CDC 112 wasn't posted until 12-10-08.

G08736 Cruz – There were 3 warrants received on 9-09-08, the CDC 112 was not posted when the warrants was received. It appears the 4 hour time frame

KERN VALLEY STATE PRISON COMPLIANCE REVIEW

was not met based on the documentation on the CDC 850, OBIS & ARDTS entry.

G15518 Davis – The warrant was received 7-24-08, the posting on the CDC 112 & the CDC 850 and the entry into OBIS & ARDTS was on 7-29-08.

T87223 Morgan – The warrant was received on 10-20-08, the CDC 850 was not posted by the CCRA with date or time, however the CDC 112 indicates the posting was done on 10-21-08.

G26632 Martinez – The warrant was received on 10-28-08, the CDC 850 and the CDC 112 were posted on 10-29-08. The OBIS and ARDTS entry were done on 10-29-08.

“Release Prior to Parole. It is imperative that when an inmate is released prior to their parole date, pursuant to Penal Code Section 4755, that a CDC Form 801, Detainer, accompanies the inmate to ensure that he/she remains in custody until his/her actual parole date.”

In reviewing the cases that had paroled to a hold or inmates that went out to court on a warrant it was noted that staff were not utilizing the most current CDC 801, Notice of Detainer, in accordance with Instructional Memo (CR 07/08). Staff has subsequently been supplied with the current form to be used.

Reference: DOM Section 72040.9 & CR 99/23

“When the records office receives notification that a detainer previously placed on an inmate has been dropped or expired, the HWD computerized history for that detainer shall be deleted”.

Time Server Log needs to be implemented pursuant to Departmental Policy. Due to not having a Time Server Log holds/warrants/detainers are not being dropped on inmates serving a time server sentence in a timely manner.

General Findings

In the Holds, Warrants and Detainer portion of the audit, 16 components were reviewed. There were 5 areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- Holds are not being dropped or entered in the KCHD system pursuant to Departmental Policy.
- Desk procedures need to be updated to ensure all current Instructional Memo's pertaining to the HWD processes are incorporated into the procedures.

KERN VALLEY STATE PRISON COMPLIANCE REVIEW

- Warrant information not accurately reflected in ARDTS, OBIS and on the CDC 112.
- Provide training to appropriate staff to ensure the CDC 850 is being properly filled out to include, but not limited to, the date of initiation, date and time of hold placed, as well as the Evaluator Section completed.
- Ensure all holds, whether received by fax, teletype or mail, is date and time stamped.

Recommendations:

- Ensure desk procedures are current and consistent.
- Provide training for the staff responsible for entering and removing warrant information into the KCHD and ARDTS systems.
- Provide documented training for the HWD clerical and ensure the Desk procedures are brought up to date and includes all HWD processes.
- Ensure compliance with Departmental Policy and procedures.
- Provide training to the appropriate staff responsible for sending out the LOI's to ensure they are processed within the appropriate time frames and the CDC 661 process is being completed accurately.

WARDEN'S CHECKOUT ORDER (CDC 161)

Reference: DOM Section 73010.6.1

"... The commitment name shall be recorded as reflected on the original Abstract of Judgment /Minute Order by which the inmate was delivered to the custody of the Department."

Reference: DOM Section 74070.3

"...Paperwork and routine dress-out procedures on cases with release date on weekends or holidays shall be completed prior to the weekend or holiday."

"Prior to release of the inmate, records office staff shall prepare the CDC Form 161, Warden's Checkout Order, and arrange distribution as required by institution operations."

Reference: DOM Section 74070.21

"The following data shall be typed on the CDC Form 161:

- *Date of Release*
- *Time of Release*
- *Type of Release*
- *CDC number*
- *Commitment name*
- *Controlling Discharge Date*
- *Name of parole unit and county of residence*

KERN VALLEY STATE PRISON COMPLIANCE REVIEW

- *Parole Region*
- *Check off section to indicate that PC Sections 3058.6 and 3058.8 notifications have been sent.*

"The CDC Form 161 shall be typed by clerical staff. As part of the prerelease audit, the release of information on the form shall be verified at a level not less than that of a Case Records Analyst as the form is used by the institution as the source document for OBIS input and therefore, its accuracy determines the accuracy of parole information in OBIS".

Reference: Instructional Memorandum (CR 01/14)

"...The CDC Form 161, Warden's Check-out Order, shall indicate that a notice was sent pursuant to the applicable notification requirement..."

"...the Warden's Checkout Order must include a notation above the Case Records staff's signature block which states PC 3058.6 and/or PC 3058.8 has been complied with or that PC 3058.6 and/or PC 3058.8 is not applicable."

Reference: Instructional Memorandum (CR 99/69)

"... Early/Late Release Reports should be prepared at the time of discovery and forwarded to Case Records, central office within a few days".

The Early/Late Release Report is to be promptly submitted to Case Records Services.

In reviewing the early/late releases with the Case Records Manager, there were five (5) late releases that have not been reported to Case Records Services at this time. Pursuant to Instructional Memorandum CR 99/69, Reports should be prepared at the time of discovery and forwarded to Case Records, Central Office within a few days. Two cases were released in October 2008, and three cases were released in November 2008.

Desk Procedures for the Parole desk clerical staff were reviewed. The staff are in the process of reviewing and updating their procedures.

Central files were reviewed for inmates/parolees who were released from Kern Valley State Prison during the preceding three weeks of the review.

There were 43 cases reviewed and the overall findings are as follows:

The CDC Form 161, Warden's Checkout Orders are to include the Time of Release pursuant to DOM Section 74070.21.

Of the 43 cases reviewed, none reflected the time of release pursuant to DOM Section 74070.21.

KERN VALLEY STATE PRISON COMPLIANCE REVIEW

General Findings

In the CDC Form 161 Warden's Checkout Order portion of the audit, 3 components were reviewed. There are two areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- The Early/Late Release Reports are not being submitted in a timely manner.
- The CDC Form 161, Warden's Checkout Order needs to reflect the time of release pursuant to Dom Section 74070.21.

Recommendations

Insure the Early/Late Release Reports are being submitted in a timely manner and in accordance with policy and procedure.

Reflect the Time of Release on the CDC Form 161, Warden Checkout Order.

STAFF VACANCIES

The vacancies reported as follows:

2 Correctional Case Records Analyst – Promotion

8 Case Records Technician – 1 resigned, 1 on leave of absence, 6 either promoted or was a lateral to a OT position

1 Case Records Analyst is out temporarily on medical, due to return on 01-15-2009.

1 Office Assistant is out on medical, due to return on 12-15-2008.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS

RISK
MANAGEMENT
PROGRAMS

KERN VALLEY STATE PRISON
DECEMBER 1 THROUGH DECEMBER 12, 2008



PRELIMINARY

CONDUCTED BY

DESIGN STANDARDS AND REVIEW BRANCH

**OFFICE OF RISK MANAGEMENT
DECEMBER 2008 AUDIT**

KERN VALLEY STATE PRISON

EXECUTIVE SUMMARY

The Office of Risk Management (ORM) conducted an audit of the Worker's Compensation Program, Occupational Health and Safety Operations and Fire, Life, Safety Systems from December 8th through December 12, 2008. The purpose of the audit/inspection was to determine the level of compliance with State, federal, and departmental rules, regulations, policies, and procedures. Auditors for this review included Fire Chief, Steve Mahoney and Staff Services Manager I, Stephanie Sebbly.

This was the first audit that the Office of Risk Management has conducted at Kern Valley State Prison. Fire Chief Driscoll serves as the Safety Officer for KVSP and North Kern State Prison (NKSP) due to the fact that the two institutions share their fire services. Chief Driscoll and the records related to the IIPP and Safety Committee are located at NKSP, requiring the auditors to visit NKSP as well. There are no findings related to the physical plant at NKSP in this report.

Findings from the audit were presented at the Exit Conference on December 12, 2008.

Elements Audited Related to Workers' Compensation

- Workers' Compensation Program
- Early Intervention Program
- Return-to-Work Program
- CAL/OSHA Log 300 Compliance
- Inmate Workers' Compensation Program

Elements Audited Related to Health and Safety

- Illness & Injury Prevention Program
- HCP (Hearing Conservation Prog)
- RPP (Respiratory Protection Prog)
- BBP (Blood Borne Pathogens Prog)
- BST (Basic Safety Training)
- HIP (Heat Illness Program)
- CSP (Confined Space Program)
- MWMAP (Cal Waste Management Act Program)
- ADAG (American with Disability Act Accessibility Guidelines Emergency Eye Wash Station)
- HIPAA (Health Insurance Portability & Accountability Act)
- CRFC (CA Retail Food Code)
- HCR (Hazardous Communication Regulation)

Elements Audited Related to Fire, Life, Safety Systems

- Training
- Equipment
- Fire Inspections
- Fire Suppression Equipment
- Hazardous Materials
- Response/Mutual Aid

Areas Inspected at KVSP

- Administration Building, Minimum Security Area, a Fire Control Boiler Room and a Library and Visiting.

Below are the audit findings, categorized under the following topics:

Category	Number of Findings
Workers' Compensation Training	1
Workers' Compensation Inmate Claims	1
Workers' Compensation RTW Program	1
Fire, Life, Safety Systems – Equipment	3
Fire, Life, Safety Systems – Inspections	1
Fire, Life, Safety Systems – Haz Mat	2
TOTAL	9

This executive summary provides the category, a brief description of the finding, criteria, and recommended corrective action.

It should be noted that only three (3) years of Workers' Compensation records were available for review due to the fact that KVSP was only activated in 2005. The Workers' Compensation/Return-To-Work (RTW) Program is staffed with very knowledgeable, capable, motivated and professional individuals that maintain a well-organized and highly efficient program.

The KVSP is currently allocated four (4) positions: An Associate Governmental Program Analyst (AGPA) that serves as the RTWC, a newly-established Staff Services Analyst (SSA) to serve as the IWCA, an Office Technician (OT) that assists the RTWC with Workers' Compensation claims for employees and handles all inmate Workers' Compensation Claims and an Office Assistant (OA) that staffs the front counter in addition to performing critical clerical tasks that keep the program running smoothly. The newly-hired staff person will begin with the program on December 15, 2008. The current RTWC will be promoting out of her position effective December 15, 2008, and the program is actively pursuing the filling of the impending vacancy.

The Associate Warden (AW) has asked for assistance from the ORM in three (3) areas:

- Streamlining existing program duty statements to most efficiently utilize the staff
- Establishing a Repetitive Motion Prevention training program.
- Communicating information from HQ more clearly. Often staff confuse suggestions from HQ to be mandates that conflict with the processes put in place by the Warden.

1. WORKERS' COMPENSATION - Training

FINDING 1. Currently, Workers' Compensation training is only provided in the New Employee Orientation course offered at the Institution. There is no training available for new Supervisors and Managers. It should be noted, however, that the Institution has proactively developed and provides a folder on their shared drive that includes pertinent information for all employees, including managers and supervisors on the Workers' Compensation claim process and all of the forms necessary for the claims process. Staff are aware of the folder, however there are no metrics in place to evaluate whether or not staff are effectively utilizing the information.

Risk/Impact: Fines could be incurred at the Institution for improperly handled claims, if Managers and Supervisors are not properly trained and made aware of their roles and responsibilities in the area of Workers' Compensation.

Recommendation: Provide regular refresher training sessions. Attendance at these training sessions should be considered "mandatory," with attendance tracked using an IST sign-in sheet and a tickler/tracking sheet with follow up by RTW office staff to ensure that required attendance is met by all supervisors and management staff.

2. WORKERS' COMPENSATION - Inmate Workers' Compensation Program

FINDING 1. Currently, a Cal OSHA log is not kept for inmate claims.

Criteria: Title 8, CCR Reg 14391-14400

Risk/Impact: The Program risks receiving a citation and/or fine from Cal OSHA.

Recommendation: Begin logging inmate claims into the Cal OSHA Log 300 and posting annual reports.

3. WORKERS' COMPENSATION - Return to Work Program

FINDING 1. The Institution does not identify marginal and essential functions including physical and mental demands. Duty Statements are only updated to reflect essential functions when needed during the processing of a Workers' Compensation claim

Risk/Impact: The RTWC/IWCA is unable to quickly provide the treating physician with a consistent essential functions job description that includes percentage of time on tasks and detailed task information such as: the number of pounds expected to lift and how often, sitting/standing for long periods of time, squatting, driving, keying at the computer and amount of daily time, etc. The ability to provide this information is critical to returning employees to work, particularly when "light duty" assignments are required.

Recommendation: Update the Institution's duty statement to include marginal and essential functions including physical and mental demands for all classifications.

4. FIRE, LIFE, SAFETY SYSTEMS – Equipment

FINDING 1. Annual extrication equipment maintenance not performed according to maintenance records.

Criteria: NFPA 1670

Risk/Impact: Equipment failure during patient extrication resulting in injury or loss of life.

Recommendation: Secure funding to ensure annual maintenance is performed by a certified vendor in order to come into compliance with NFPA standards.

FINDING 2. Turnouts exceed service life.

Criteria: NFPA 1971

Risk/Impact: Equipment failure during fire emergency resulting in injury or loss of life of firefighters.

Recommendation: Secure funding to replace outdated turnouts in order to come into compliance with NFPA standards and reduce risk of injury and loss of life.

FINDING 3. Exhaust fan not installed in truck bay.

Criteria: Title 8

Risk/Impact: Prolonged and chronic exhaust fume inhalation by staff and inmates could occur resulting in time lost and workers' compensation costs.

Recommendation: Secure funding to install an approved exhaust system in order to come into compliance with Title 8 standards.

5. FIRE, LIFE, SAFETY SYSTEMS – Fire Inspections

FINDING 1. The lack of maintenance and testing of smoke detectors in all housing units is causing complete default of all systems.

Criteria: California Fire Code, Group I, Division 3.

Risk/Impact: Delayed response to fire emergencies could result in injury, loss of life and property.

Recommendation: Secure funding to ensure repairs are performed by a certified vendor.

6. HEALTH AND SAFETY – Hazardous Materials

FINDING 1. The used oil storage area at the garage does not have a rain cover to eliminate rain from entering the secondary storage containment system.

Criteria: Title 8, §5192 and §5194

Risk/Impact: Rainwater in the secondary storage containment system creates an additional hazardous waste cost and exposure in the event of a container failure.

Recommendation: Install a rain cover over the existing accumulation point at the used oil storage area.

FINDING 2. The used oil storage area at the garage does not have a sign posted identifying the product stored at that location.

Criteria: Title 8, §5192 and §5194

Risk/Impact: Inaccurate identification of a product in the event of an emergency or a spill clean-up could cause injury or death to responders.

Recommendation: Install a sign at the used oil storage area identifying the product.

The Office of Risk Management appreciates the opportunity to participate in the audit at Kern Valley State Prison and would like to thank the staff for their assistance and cooperation. We are pleased to be available to assist in any way we can. Thank you.